2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2009
Secretary of State

DOCUMENT# P08000016071

Entity Name: LOS PINOS INC

Current Principal Place of Business:

1144 SUNVIEW STREET
FORT WHITE, FL 32038

New Principal Place of Business:

2686 49TH DRIVE
LAKE CITY, FL 32024

Current Mailing Address:

1144 SUNVIEW STREET
FORT WHITE, FL 32038

New Mailing Address:

2686 49TH DRIVE
LAKE CITY, FL 32024

FEI Number: 26-3233333 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OVALLE, PEDRO
1144 SUNVIEW STREET
FORT WHITE, FL 32038 US

Name and Address of New Registered Agent:

OVALLE, PEDRO
2686 49TH DRIVE
LAKE CITY, FL 32024 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PEDRO OVALLE 05/27/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P V ( ) Delete
Name: OVALLE, PEDRO
Address: 1144 SUNVIEW STREET
City-St-Zip: FORT WHITE, FL 32038

Title: S T ( ) Delete
Name: OVALLE, PEDRO
Address: 1144 SUNVIEW STREET
City-St-Zip: FORT WHITE, FL 32038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P V (X) Change ( ) Addition
Name: OVALLE, PEDRO
Address: 2686 49TH DR
City-St-Zip: LAKE CITY, FL 32024

Title: S T (X) Change ( ) Addition
Name: OVALLE, PEDRO
Address: 2686 49TH DR
City-St-Zip: LAKE CITY, FL 32024

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PEDRO OVALLE P 05/27/2009
Electronic Signature of Signing Officer or Director Date