2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000106089

FILED Feb 18, 2009 Secretary of State

Entity Name: THE PINK RIBBON POST- MASTECTOMY BOUTIQUE, INC

	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
SUITE 11	CTOR ROAD A, FL 34231				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
SUITE 11	CTOR ROAD				
FEI Number	: 26-3851602	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
UNIT 1A	EVA ONUT BAY LA A, FL 34237				
	named entity e of Florida.	submits this statement for the	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUI	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
			, , , , , , , , , , , , , , , , , , , ,		
Title: Name: Address: City-St-Zip:	VALENT, EVÀ) Delete IT BAY LANE UNIT 1A - 34237	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: EVA VALENT P 02/18/2009