

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000029731

Entity Name: PINECREST CAPITAL, INC.

FILED  
Jan 03, 2008  
Secretary of State

**Current Principal Place of Business:**

6201 SW 145 ST  
MIAMI, FL 33158

**New Principal Place of Business:**

6201 MARLIN DRIVE  
CORAL GABLES, FL 33158

**Current Mailing Address:**

6201 SW 145 ST  
MIAMI, FL 33158

**New Mailing Address:**

6201 MARLIN DRIVE  
CORAL GABLES, FL 33158

FEI Number: 65-0588826

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRUMFIELD, CRAIG  
6201 S.W. 145 STREET  
MIAMI, FL 33158 US

**Name and Address of New Registered Agent:**

BRUMFIELD, CRAIG  
6201 MARLIN DRIVE  
CORAL GABLES, FL 33158 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: CRAIG BRUMFIELD

01/03/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BRUMFIELD, CRAIG  
Address: 6201 SW 145TH ST  
City-St-Zip: MIAMI, FL 33158

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BRUMFIELD, CRAIG  
Address: 6201 MARLIN DRIVE  
City-St-Zip: CORAL GABLES, FL 33158

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: CRAIG BRUMFIELD

P

01/03/2008

Electronic Signature of Signing Officer or Director

Date