

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000072515

Entity Name: THE PINO GROUP, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

8377 PINES BLVD
PEMBROKE PINES, FL 33024 US

New Principal Place of Business:

8359 PINES BLVD
PEMBROKE PINES, FL 33024 US

Current Mailing Address:

8377 PINES BLVD
PEMBROKE PINES, FL 33024 US

New Mailing Address:

8359 PINES BLVD
PEMBROKE PINES, FL 33024 US

FEI Number: 65-0814032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MESA, ANTOLIN
7932 PINES BLVD.
PEMBROKE PINES, FL 33024 US

Name and Address of New Registered Agent:

MESA, ANTOLIN
8359 PINES BLVD.
PEMBROKE PINES, FL 33024 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:

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MESA, ANTOLIN
Address: 7932 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: VP () Delete
Name: MARTINEZ, BEATRIZ
Address: 7932 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33024 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MESA, ANTOLIN
Address: 8359 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: VP (X) Change () Addition
Name: MARTINEZ, BEATRIZ
Address: 8359 PINES BLVD
City-St-Zip: PEMBROKE PINES, FL 33024 US

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: ANTOLIN MESA

PD

04/30/2009

Electronic Signature of Signing Officer or Director

Date