

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 21, 2005 8:00 am**  
**Secretary of State**

03-21-2005 90076 043 \*\*\*150.00

<b>DOCUMENT # P98000056499</b> 1. Entity Name <b>PINSONIC INVESTMENTS, INC.</b>																											
Principal Place of Business <b>11 AVE. DE LA MER UNIT 1107 PALM COAST, FL 32137-2258</b>		Mailing Address <b>11 AVE. DE LA MER UNIT 1107 PALM COAST, FL 32137-2258</b>																									
2. Principal Place of Business <b>112 CLUBHOUSE Drive</b> Suite, Apt. #, etc. <b># 203-C</b> City & State <b>PALM COAST, FL</b> Zip <b>32137</b>		3. Mailing Address <b>112 CLUBHOUSE Drive</b> Suite, Apt. #, etc. <b># 203-C</b> City & State <b>PALM COAST, FL</b> Zip <b>32137-3897</b>																									
Country <b>FLAGLER</b>		Country <b>FLAGLER</b>																									
4. FEI Number <b>59-3513666</b>		Applied For <input type="checkbox"/> Not Applicable																									
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required																									
6. Name and Address of Current Registered Agent  <b>PINSON, RICK R 11 AVE. DE LA MER UNIT #1107 PALM COAST, FL 32137</b>		7. Name and Address of New Registered Agent Name <b>RICK R. PINSON</b> Street Address (P.O. Box Number is Not Acceptable) <b>112 CLUBHOUSE DR.</b> <b># 203-C</b> City <b>PALM COAST</b> <b>FL</b> Zip Code <b>32137</b>																									
8. 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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE <b>RICK R. PINSON</b> <i>Rick R. Pinson</i> <b>3-17-2005</b> <small>Signature, typed or printed name of registered agent and if applicable. (NOTE: Registered Agent signature required when re-stating) DATE</small>																											
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees																									
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">D</td> <td style="width:10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td colspan="2">PINSON, RICK R</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">11 AVE. DE LA MER</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">PALM COAST, FL 321372258</td> </tr> </table>		TITLE	D	<input type="checkbox"/> Delete	NAME	PINSON, RICK R		STREET ADDRESS	11 AVE. DE LA MER		CITY-ST-ZIP	PALM COAST, FL 321372258		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">P</td> <td style="width:10%; text-align: center;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td colspan="2">RICK R. PINSON</td> </tr> <tr> <td>STREET ADDRESS</td> <td colspan="2">112 CLUBHOUSE DR., # 203-C</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td colspan="2">PALM COAST, FL 32137</td> </tr> </table>		TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	RICK R. PINSON		STREET ADDRESS	112 CLUBHOUSE DR., # 203-C		CITY-ST-ZIP	PALM COAST, FL 32137	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																											
SIGNATURE: <i>Rick R. Pinson</i> <b>RICK R. Pinson</b> <b>3-17-05</b> <b>446-5794</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																											