

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000095623

Entity Name: PINPOINT SYSTEMS INC.

FILED
Jan 10, 2009
Secretary of State

Current Principal Place of Business:

902 SW 35 AVE
BOYNTON BEACH, FL 33435

New Principal Place of Business:

Current Mailing Address:

902 SW 35 AVE
BOYNTON BEACH, FL 33435

New Mailing Address:

FEI Number: 59-2310731

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

URQUHART, ALBERT B
902 SW 35 AVE
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DANIELS, TIM
Address: 140 VIA D' ESTE, APT 808
City-St-Zip: DELRAY BEACH, FL 33445

Title: D () Delete
Name: URQUHART, BRUCE
Address: 902 SW 35TH AVE
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D () Delete
Name: STEIN, SABINE
Address: 902 SW 35 AVE
City-St-Zip: BOYNTON BEACH, FL 33435

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DANIELS, TIM
Address: 285 SE 6TH AVENUE, UNIT M
City-St-Zip: DELRAY BEACH, FL 33483

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRUCE URQUHART

DIR

01/10/2009

Electronic Signature of Signing Officer or Director

Date