

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000011012

Entity Name: 305 PINK PACK, INC**Current Principal Place of Business:**432 NAVARRE AVE
CORAL GABLES, FL 33134**Current Mailing Address:**145 MADEIRA AVE
SUITE 317
CORAL GABLES, FL 33134 US**FEI Number:** 84-3414585**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CARRERA, ROSEMARY A
432 NAVARRE AVE
CORAL GABLES, FL 33134 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title OTHER, EXECUTIVE DIRECTOR
Name CARRERA, ROSEMARY A
Address 432 NAVARRE AVE
City-State-Zip: CORAL GABLES FL 33134

Title PRESIDENT
Name DEL CERRO, JUAN
Address 145 MADEIRA AVE
SUITE 317
City-State-Zip: CORAL GABLES FL 33134

Title VP
Name GRILLONE, MICHELLE
Address 145 MADEIRA AVE
SUITE 317
City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY
Name ZAMBRANA, MICHELLE
Address 145 MADEIRA AVE
SUITE 317
City-State-Zip: CORAL GABLES FL 33134

Title OFFICER
Name HERRERA, MARLENE
Address 145 MADEIRA AVE
SUITE 317
City-State-Zip: CORAL GABLES FL 33134

Title OFFICER
Name DENARDI, DEBBIE
Address 16850 COLLINS AVE
112-701
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title TREASURER
Name TULLIS, TAMMY
Address 145 MADEIRA AVE
SUITE 317
City-State-Zip: CORAL GABLES FL 33134

Title OFFICER
Name PEREZ, ALEJANDRA
Address 145 MADEIRA AVE
SUITE 317
City-State-Zip: CORAL GABLES FL 33134

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROSEMARY CARRERA**EXECUTIVE DIRECTOR****05/02/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OFFICER
Name NAPOLEON, XIOMARA
Address 145 MADEIRA AVE
 SUITE 317
City-State-Zip: CORAL GABLES FL 33134

Title OFFICER
Name PIZARRO, CESAR
Address 145 MADEIRA AVE
 SUITE 317
City-State-Zip: CORAL GABLES FL 33134