


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 08, 2007 08:00 AM
Secretary of State

DOCUMENT # 630672 1. Entity Name PRECISION TRADING CORP.		
Principal Place of Business 1430 NW 88 AVE MIAMI, FL 33172	Mailing Address 1430 NW 88 AVE MIAMI, FL 33172	



02212007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1938903	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

LAPCIUC, ISRAEL
1753 NORTHVIEW DRIVE
SUNSET ISLAND NO 1
MIAMI BEACH, FL 33140

DO NOT WRITE
IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000659529
03/16/07-80034-013 150.00

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	LAPCIUC, ISRAEL
STREET ADDRESS	1753 NORTHVIEW DR
CITY-ST-ZIP	MIAMI BCH, FL
TITLE	V
NAME	BEDA, SIMON
STREET ADDRESS	19407 PRESIDENTIAL WAY
CITY-ST-ZIP	N MIAMI BEACH, FL 33179
TITLE	S
NAME	LAPCIUC, TANIA
STREET ADDRESS	1753 NORTHVIEW DR
CITY-ST-ZIP	MIAMI BCH, FL
TITLE	VPT
NAME	LAPCIUC, MARCOS
STREET ADDRESS	2108 N BAY RD
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/2/07 (305)-5924500
Date Daytime Phone #