


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2008 08:00 A
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

DO NOT WRITE IN THIS SPACE



03042008 No Chg-P CR2E034 (11/05)

4. FEI Number
 59-1938903

Applied For
 Not Applicable

5. Certificate of Status Desired **\$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)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

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

U00000255108
 03/27/08-80036-009 150.00

10. OFFICERS AND DIRECTORS

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

Date: 3/4/08 Daytime Phone: 305.592.4500