2008 FOR PROFIT CORPORATION

SIGNATURE: PIT CHAISUR IVIRAT, PRESUPENT
SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

ANNUAL REPORT **FILED** DOCUMENT # P01000027699 1. Entity Name Jul 23, 2008 08:00 AM PITT INC. Secretary of State Principal Place of Business Mailing Address -2577 26TH AVE N 2577 26TH AVE N ST PETERSBURG, FL 33713 ST PETERSBURG, FL 33713 No Chg-P CR2E034 (11/05) 03272008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3709844 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CHAISURIVIRAT, PITT 2577 26TH AVE N ST PETERSBURG, FL 33713 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE U00000956077 PITT, CHAISURIVIRAT NAME 07/23/08-80001-014 550.00 STREET ADDRESS 2577 26TH AVE N CITY-ST-ZIP SAINT PETERSBURG, FL 33713 TITLE ST SUNAN, CHAISURIVIRAT NAME STREET ADDRESS 2577 26TH AVE N SAINT PETERSBURG, FL 33713 CITY-ST-ZIP D VIRIYA, CHAISURIVIRAT NAME STREET ADDRESS 2577 26TH AVE N DO NOT WRITE CITY-ST-ZIP SAINT PETERSBURG, FL 33713= IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREÉT ADDRESS CITY-ST-ZIP 🦠 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, 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 it 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.

727-593-2521

Daytime Phone #