

**FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Jul 12, 2007 8:00 am
Secretary of State

DOCUMENT # P04000080797



1. Entity Name

PRECISION FORMED SOLUTIONS GROUP, INC.

07-12-2007 90083 001 ***157.50

07-12-2007 90083 002 *****1.25

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1350 ATLANTIC SHORES BLVD.

3. Mailing Address

1350 ATLANTIC SHORES BLVD.

Suite, Apt. #, etc.

303

Suite, Apt. #, etc.

303

City & State

HALLANDALE, FLORIDA

City & State

HALLANDALE, FLORIDA

Zip

33009

Country

USA

Zip

33009

Country

USA

4. FEI Number

20-1173190

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

SPIEGEL, UTRECA, P.A.

Street Address (P.O. Box Number is Not Acceptable)

1840 SW 22 STREET

4TH FLOOR

City

MIAMI

FL

Zip Code

33145

**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:

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended AR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT-TREASURER
JAY OHANESIAN
1350 ATLANTIC SHORES BLVD. # 303
HALLANDALE, FL. 33009

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE PRESIDENT-SECRETARY
NICHOLAS FANELLI
3114 SW OCEAN BLVD. #804
HIGHLAND BEACH, FL. 33487

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: X Jay Ohanian JAY OHANESIAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 7/9/07 (941) 454-8807

Date

Daytime Phone

ATTACHMENT
66020292

7/9/07

Annual Report
Division of Corporations
P.O. Box 1500
Tallahassee, Fl. 32302 - 1500

Re: Precision Formed Solutions Group, Inc.
P04-000080792
2007 Corporate Renewal

Gentlemen:

The above Corporation never received
the 2007 renewal postcard.

Enclosed please find checks totaling
\$158.75 for the renewal.

Sincerely,
Allen D. Steinberg
Accountant for the
Corporation