

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 12, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000105789

1. Entity Name
PRECISION PRODUCTS OF AMERICA, INC.



Principal Place of Business
240 W 24TH STREET
HIALEAH, FL 33010

Mailing Address
240 W 24TH STREET
HIALEAH, FL 33010



05102006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1378822

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

VILARCHAO, CARLOS
240 W 24TH STREET
HIALEAH, FL 33010

**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

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY, ST, ZIP	D PRETE, RICHARD 240 W 24TH STREET HIALEAH, FL 33010
TITLE NAME STREET ADDRESS CITY, ST, ZIP	D VILARCHAO, CARLOS 240 W 24TH STREET HIALEAH, FL 33010
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TITLE NAME STREET ADDRESS CITY, ST, ZIP	

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05/20/06-80078-019 150.00

**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:

Carlos Vilarchao
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-10-06

Date

305.884.3653

Daytime Phone #