

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000072608

1. Entity Name
PITCHA, INC.



Principal Place of Business
2577 26TH AVE N
ST PETERSBURG, FL 33713

Mailing Address
2577 26TH AVE N
ST PETERSBURG, FL 33713

FILED
Jul 23, 2008 08:00 AM
Secretary of State



03272008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
56-2579913

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CHASURIVIRAT, PITT
2577 26TH AVE N
ST PETERSBURG, FL 33713

**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, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CHASURIVIRAT, PITT
STREET ADDRESS	2577 26TH AVE N
CITY-ST-ZIP	ST PETERSBURG, FL 33713
TITLE	STD
NAME	CHASURIVIRAT, SUNAN
STREET ADDRESS	2577 26TH AVE N
CITY-ST-ZIP	ST PETERSBURG, FL 33713
TITLE	D
NAME	CHASURIVIRAT, VIRIYA
STREET ADDRESS	2577 26TH AVE N
CITY-ST-ZIP	ST PETERSBURG, FL 33713
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/23/08-80001-007 550.00

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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: PIT CHASURIVIRAT, PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/18/08 727-593-2521