

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 02, 1999 8:00 am  
Secretary of State

03-02-1999 90144 010 \*\*\*150.00

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DOCUMENT # P97000098369

1. Corporation Name

PITTSBURGH TRADING, INC.

Principal Place of Business

4699 N. FEDERAL HWY  
SUITE 205B  
POMPANO BEACH FL 33064  
US

Mailing Address

4699 N. FEDERAL HWY  
SUITE 205B  
POMPANO BEACH FL 33064  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/17/1997

4. FEI Number

65-0795062

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes

☐ No

2. Principal Place of Business

21 6968 NW 30th AVE  
Suite, Apt. #, etc.

22

City & State

23 FT. LAUDERDALE, FL

Zip

24 33309

Country

25 USA

2a. Mailing Address

26 6968 NW 30th  
Suite, Apt. #, etc.

27

City & State

28 FT. LAUDERDALE, FL

Zip

29 33309

Country

30 USA

9. Name and Address of Current Registered Agent

GLASS, ROBIN  
4699 N. FEDERAL HWY, STE. 205A  
POMPANO BEACH FL 33064

10. Name and Address of New Registered Agent

81 Name

ROBIN GLASS

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

6968 NW 30th AVE

83

84 City

FT. LAUDERDALE

FL

85 Zip Code

33309

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

01/19/99

OFFICERS AND DIRECTORS

12. TITLE PVP ☐ DELETE

NAME SANTOS, JOAO GUSMAD DO  
STREET ADDRESS 18670 SEA TURTLE LA  
CITY-ST-ZIP BOCA RATON FL 33498

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PVP ☒ Change ☐ Addition

1.2 NAME JOAO GUSMAD DOS SANTOS  
1.3 STREET ADDRESS 6968 NW 30th AVE  
1.4 CITY-ST-ZIP FT. LAUDERDALE FLORIDA 33309

2.1 TITLE TS ☐ Change ☒ Addition

2.2 NAME ROBIN GLASS  
2.3 STREET ADDRESS 6968 NW 30th AVE  
2.4 CITY-ST-ZIP FT. LAUDERDALE FLORIDA 33309

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/19/98

(954) 816-7487

CR2E034 (11/98)