2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000098369

Entity Name: PITTSBURGH TRADING, INC.

FILED Sep 09, 2002 Secretary of State

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
C/O AREK	EDERAL HWY (MAJUS O BEACH, FL 33(064 US		
Current Mailing Address:		New Mailing Address	New Mailing Address:	
C/O AREK	EDERAL HWY (MAJUS O BEACH, FL 33(064 US		
FEI Number	: 65-0795062 I	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of Cur	rent Registered Agent:	Name and Address o	f New Registered Agent:
POMPANO	EDERAL HWY D BEACH, FL 333 named entity sub		purpose of changing its registered	d office or registered agent, or both.
	e di Fidilua.			,
SIGNATUI				
SIGNATUI	RE:	Signature of Registered A	gent	Date
This corpor	RE: Electronic s	atisfy its Intangible Tax filing re	gent equirement and elects to do so (X).	
This corpor Election Cal	RE: Electronic s	atisfy its Intangible Tax filing re rust Fund Contribution ().	equirement and elects to do so (X).	
This corpor Election Cal	RE: Electronic ation is eligible to sampaign Financing Tr	atisfy its Intangible Tax filing retrust Fund Contribution (). ORS: elete USMADDOS	equirement and elects to do so (X).	Date
This corpor Election Car OFFICER: Title: Name: Address:	RE: Electronic station is eligible to sampaign Financing Tr S AND DIRECTO PVP () De SANTOS, JOAD GL 6968 NW 30TH AV	atisfy its Intangible Tax filing retrust Fund Contribution (). DRS: elete USMADDOS //E //F J33309	equirement and elects to do so (X). ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBIN GLASS TS 09/09/2002