

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

FILED
Jun 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F96000001970 (0)
 1. Corporation Name
PRESSCO TECHNOLOGY INC.



Principal Place of Business: **29200 AURORA RD. SOLON OH 44139**
 Mailing Address: **29200 AURORA RD. SOLON OH 44139**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
 21 Suite, Apt. #, etc.
 22 City & State
 23 Zip Country
 24 Zip Country

2a. Mailing Address
 26 Suite, Apt. #, etc.
 27 City & State
 28 Zip Country
 29 Zip Country

3. Date Incorporated or Qualified
04/22/1996

4. FEI Number
31-0721150
 Applied For: Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
VOGT, ROBERT
6985 CARDON ROAD
RIVIERA BEACH FL 33404

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this form 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. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent signature required when resigning.)

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	COCHRAN, DON W	
STREET ADDRESS	29200 AURORA RD.	
CITY-ST-ZIP	SOLON OH 44139	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	COCHRAN, JAMES A	
STREET ADDRESS	29200 AURORA RD.	
CITY-ST-ZIP	CLEVELAND OH 44139-1847	
TITLE	D	<input type="checkbox"/> DELETE
NAME	HOCEVAR, JOHN A	
STREET ADDRESS	29200 AURORA RD.	
CITY-ST-ZIP	CLEVELAND OH 44139-1847	
TITLE	V	<input type="checkbox"/> DELETE
NAME	O'BRIEN, THOMAS P	
STREET ADDRESS	29200 AURORA RD.	
CITY-ST-ZIP	SOLON OH 44139	
TITLE	V	<input type="checkbox"/> DELETE
NAME	COAN, P. RICHARD	
STREET ADDRESS	29200 AURORA RD.	
CITY-ST-ZIP	SOLON OH 44139	
TITLE	<input checked="" type="checkbox"/> DELETE	
NAME	GEHRMAN, DANIEL L	
STREET ADDRESS	29200 AURORA RD.	
CITY-ST-ZIP	CLEVELAND OH 44139-1847	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	ADD DARLING DON
5.3 STREET ADDRESS	29200 Aurora Rd
5.4 CITY-ST-ZIP	SOLON OH 44139
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	MORGAN Edward
6.3 STREET ADDRESS	29200 Aurora Rd
6.4 CITY-ST-ZIP	SOLON OH 44139

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.

SIGNATURE: _____

5-30-98

CR2E034 (10/97)