## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT # H61813** 01-17-2006 90270 004 \*\*\*158.75 1. Entity Name PRECISION ENTERPRISES, INC. 4000544, Principal Place of Business Mailing Address 505 CANAVERAL GROVES BLVD. 505 CANAVERAL GROVES BLVD. COCOA, FL 32926 COCOA, FL 32926 2. Principal Place of Business Mailing Address 3975 E RAIL COAD AVE. 3975 E. RAILTOAD AVE Suite, Apt. #, etc. Suite, Apt. #, etc. 01112006 Chg-P CR2E034 (11/05) City & State Applied For City & State 4 FEI Number FLORIDA CUCOA FLORIDA CUCOA 59-3139462 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 32926 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Shye , JASON SHYE, JASON Street Address (P.O. Box Number is Not Acceptable) 505 CANAVERAL GROVES BLVD COCOA, FL 32926 E. 3975 RAILrOAD Avenue City COCOA 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 nt and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ST Delete TITLE TITLE Change ☐ Addition Shye, JASON 3975 E. RAILTUAD AVE SHYE, JASON NAME NAME 505 CANAVERAL GROVES BLVD STREET ADDRESS STREET ADDRESS 32926 CITY-ST-ZIP COCOA, FL 32926 CUCCA FL CITY-ST-7/P VP TITLE ☐ Delete TITLE v P **SkChange** Addition GRAY, TODD 3975 E. RAILTOAD AVE GRAY, TODD NAME NAME STREET ADDRESS 505 CANAVERAL GROVES BLVD. STREET ADDRESS CITY-ST-ZIP COCOA, FL CUCCA CITY-ST-ZIP FL 32926 TITLE ☐ Delete M Change · 🗖 Addition Kelly Robert 3975 ERAILTOAD AVE NAME ROBERT, KELLY W NAME STREET ADDRESS 505 CANVERAL GROVES BLVD STREET ADDRESS CUCOA FL 32926 CITY-ST-ZIP COCOA, FL 32926 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-7IP TITLE ☐ Detete TITLE ☐ Change Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 tolevaectes 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.

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SIGNATURE:

FILED Jan 17, 2006 8:00 am

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