

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 272988

1. Entity Name
PROMPT MACHINE & ENGINEERING CO



Principal Place of Business
5600 COMMERCIAL BLVD
WINTER HAVEN, FL 33880

Mailing Address
5600 COMMERCIAL BLVD
WINTER HAVEN, FL 33880

FILED
Aug 04, 2008 08:00 AM
Secretary of State



07312008 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1425105

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

BEUERLE, GUENTHER
5600 COMMERCIAL BLVD.
WINTER HAVEN, FL 33880

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

[Signature]

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7/31/08

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ST
BEUERLE, LINDA
5600 COMMERCIAL BLVD.
WINTER HAVEN, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
BEUERLE, GUENTHER
5600 COMMERCIAL BLVD
WINTER HAVEN, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
REX, BILL
5600 COMMERCIAL BLVD
WINTER HAVEN, FL 33880

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
REX, ANDREA
5600 COMMERCIAL BLVD
WINTER HAVEN, FL 33880

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000956939
08/04/08-80001-024 150.00

DO NOT WRITE
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 empowerments.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/31/08

863-9651933