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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Jan 20 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name

484362

PRECISION MANUFACTURING AND SALES INC

Principal Place 2140 RANGE I P O BOX 149 CLEARWATER	ROAD	Mailing Address 2140 RANGE ROAD P O BOX 149 CLEARWATER FL 34917	33757	,	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/12/1975
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number Applied For
et		26			59-1716414 Not Applicable
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required
City & State	3	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees
Zip	Country Zip		Country		8. This corporation owes or has paid the current year Intangible
4	25	29	30		Personal Property Tax due June 30. 🔀 Yes 🗌 No
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Registered Agent
	JNET, NORMAND & EDNA		8	1 Name	
108 ALETA DRIVE			8	Street Address (P.O. Box Number is Not Acceptable)	
BEL	LEAIR BEACH FL-20535 3:	3786	8	3	
			8	4 City	85 Zip Code
				-	corporation submits this statement for the purpose of changing its registered
agent. I an	n familiar with, and accept the ob- Signature, typed or printed name of registered	oligations of, Section 607.0505, FI	lorida Statut	98. gent signature	required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	Marie Committee and Marie Committee and Comm		1.2 NAM		
STREET ADDRESS	AAA ALDEA DEBUG			ET ADDRESS	
CITY-ST-ZIP	BELLEAIR BEACH FL			ST-ZIP	
TITLE			2.1 TITLE		Change Addition
NAME	BRUNET, EDNA C. 221		2.2 NAM	.	
STREET ADDRESS			2.3 STR€	ET ADDRESS	
CITY-ST-ZIP	BELLEAIR BEACH FL		2. 4 CfTY	-ST-ZIP	
TITLE	\$T				☐ Change ☐ Addition
NAME	FETROW, MICHELLE		3.2 NAM		
STREET ADDRESS	0.0		3.3 STRE	ET ADDRESS	
CITY-ST-ZIP			3.4. CITY		
TITLE	•	D DELETE 4.1 TI			Change Addition
NAME	FETROW, MICHELLE		4. 2 NAV		
STREET ADDRESS	872 VILLAGE WAY			ET ADDRESS	
CITY-ST-ZIP	PALM HARBOR FL	DELETE	4.4 CITY		Change Addition
TITLE		pricit	5.1 TITLE		Change Modified
NAME CTOCCT ADDDCCC			5.2 NAM	ET ADDRESS	
STREET ADDRESS		0.00	5.3 STRE 5.4 CITY		
CITY-ST-ZIP TITLE			6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAMI		
STREET ADDRESS		•		ET ADDRESS	
CITY-ST-ZIP			6.4 CITY		
14. Thereby 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.					

Rdna C Brunet