

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 484362

1. Entity Name

PRECISION MANUFACTURING AND SALES, INC.

FILED

Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90347 047 ***158.75

Principal Place of Business

2140 RANGE ROAD
CLEARWATER FL 33765
US

Mailing Address

2140 RANGE ROAD
CLEARWATER FL 33765
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-1716414

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fees Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRUNET, NORMAND & EDNA

108 ALETA DRIVE

BELLEAIR BEACH FL ~~33535~~ 33786

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code 33786

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME BRUNET, NORMAND A.
STREET ADDRESS 108 ALETA DRIVE
CITY-ST-ZIP BELLEAIR BEACH FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VDST ☐ Delete
NAME BRUNET, EDNA C
STREET ADDRESS 108 ALETA DRIVE
CITY-ST-ZIP BELLEAIR BEACH FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edna C. Brunet Edna C. Brunet-Vice Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-01-01 727-447-4025
Date Daytime Phone #

CR2E034 (10/00)