## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 578729**

1. Entity Name

## POMPANO PRECISION PRODUCTS, INC.

Principal Place of Business 131 SW 5 ST POMPANO BEACH FL 33060

Mailing Address

131 SW 5TH STREET POMPANO BEACH FL 33060-7903

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address				
	Suite, Apt. #, etc.				
City & State	City & State				

**FILED** Mar 07, 2000 8:00 am Secretary of State

03-07-2000 90105 049 \*\*\*158.75



Suite, Apt. #, etc.  City & State		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
		City & State			4. FEI Number 59-1835273 Applied Not Appl				
Zip	Country	Zip	Country	ļ	Certificate of Status Desired		8.75 Add ee Required		
	6. Name and Address of Cur	rent Registered Agent		7. !	Name and Address of New F	Registered Ag	gent		
		n with a second	- Name	•					
SPIRIO, GEORGE J. 131 SW 5 ST POMPANO BEACH FL 33060		Street	Street Address (P.O. Box Number is Not Acceptable)						
			City			FL	Zip Code	 Э	
. The above	named entity submits this statemen	ent for the purpose of changing	g its registered office	or registered ag	ent, or both, in the State of Fl	orida			
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE: Registered Agent sig	nature required when re	einstating)	DATE			
Tax filing r	oration is eligible to satisfy its Intan equirement and elects to do so. ia on back)	After MAY 1	OW!!! FEE IS \$15 , 2000 Fee will be ayable to Departmo	\$550.00	10. Election Campaign Fi Trust Fund Contribution			May Be to Fees	
11.	OFFICERS	AND DIRECTORS	12.	AD	DITIONS/CHANGES TO OFF	ICERS AND I	DIRECTOR	3 IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SPIRIO, GEORGE J. 131 SW 5TH STREET	☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	POMPANO BEACH FL STD SPIRIO, DEBRA A. 131 SW 5TH STREET POMPANO BEACH FL	Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOM AND OD ON TE	Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	F. CHA SIBISO POMPA	RIES ERDMANN W. 5'H STRBET NO BENCH, FLA	, JR. · 3306	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP		•		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	s			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRES CITY-ST-ZIP	ss			☐ Change	☐ Addition	
13. I hereby of indicated of the core	certify that the information supplie on this report or supplemental re poration or the receiver or trustee or on an attachmen with an add	port is true and accurate and t empowered to execute this re	ify for the exemption that my signature sha						

SIGNATURE:

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

650RGE J. Spirio 1 1400 (954) 946-6059