

ANNUAL REPORT

1995

SECRETARY OF STATE
DIVISION OF CORPORATIONS

FILED

65 MAY -1 AM 1:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 615416

(5)

1. Corporation Name

FLORIDA PRECISION SYSTEMS, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business

44 S.E. 9TH STREET
DEERFIELD BEACH FL 33441

Mailing Address

44 S.E. 9TH STREET
DEERFIELD BEACH FL 33441

3. Date Incorporated or Qualified

03/26/1979

3a. Date of Last Report

05/03/1994

4. FEI Number

59-1898984

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees9. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes☐ Yes☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27 City & State

28

Zip

Country

9. Name and Address of Current Registered Agent

DIBELLA, ALBERTO
44 S.E. 9TH STREET
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

81 Name

ALBERTO DI BELLA

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

3500 BAYVIEW DRIVE

83

84 City

FORT LAUDERDALE

FL

85 Zip Code

33308

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE STD
NAME DIBELLA, ADELE M
STREET ADDRESS 44 S.E. 9TH STREET
CITY - ST - ZIP DEERFIELD BEACH FLTITLE PD
NAME DIBELLA, ALBERTO
STREET ADDRESS 44 S.E. 9TH STREET
CITY - ST - ZIP DEERFIELD BEACH FLTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIPTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE STD
1.2 NAME ADELE DI BELLA ☒ Change ☐ Addition
1.3 STREET ADDRESS 3500 BAYVIEW DRIVE
1.4 CITY - ST - ZIP FORT LAUDERDALE FL 333082.1 TITLE PD
2.2 NAME ALBERTO DI BELLA ☒ Change ☐ Addition
2.3 STREET ADDRESS 3500 BAYVIEW DRIVE
2.4 CITY - ST - ZIP FORT LAUDERDALE, FL 333083.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Alberto Di Bella
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-95 305 421 6141

Date

(Type in Block 13)