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Aug 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F35756** (8)

1. Corporation Name
PRECISION INTERNATIONAL CORPORATION

Principal Place of Business	Mailing Address
25551 BANFF LANE PUNTA GORDA FL 33983-6124	25551 BANFF LANE PUNTA GORDA FL 33983-6124 PO Box 88685 Carol Stream Illinois 60188

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	
21 1341 Rolling Oaks Dr	26 PO Box 88685	05/21/1981	
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 59-2091658	☐ Applied For ☐ Not Applicable
23 City & State: Carol Stream Illinois	28 City & State: Carol Stream Ill	5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
24 Zip: 60188 / 25 Country: USA	29 Zip: 60188 / 30 Country: USA	6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☑ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WALL, JAMES J ~~25551 BANFF LANE~~ 3919 San Rocco Dr #34A PUNTA GORDA FL ~~33983~~ 33950-7952	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL

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: Michael K. Wall President 7-6-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PST	☐ DELETE	1.1 TITLE	CHAIRMAN	☑ Change ☐ Addition
NAME	WALL, JAMES J		1.2 NAME	James J. Wall	
STREET ADDRESS	25551 BANFF LANE		1.3 STREET ADDRESS	3919 San Rocco Dr	
CITY-ST-ZIP	PUNTA GORDA FL		1.4 CITY-ST-ZIP	Punta Gorda FLA 33950	
TITLE	VP	☐ DELETE	2.1 TITLE	President	☑ Change ☐ Addition
NAME	WALL, MICHAEL N		2.2 NAME	Michael N Wall	
STREET ADDRESS	1341 ROLLING OAKS DR		2.3 STREET ADDRESS	1341 Rolling Oaks Dr	
CITY-ST-ZIP	CORAL STREAM IL		2.4 CITY-ST-ZIP	Carol Stream IL 60188	
TITLE		☐ DELETE	3.1 TITLE	Secretary	☐ Change ☑ Addition
NAME			3.2 NAME	Marlene K. Wall	
STREET ADDRESS			3.3 STREET ADDRESS	1341 Rolling Oaks Dr	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	Carol Stream IL 60188	
TITLE		☐ DELETE	4.1 TITLE	100002627061	☐ Change ☐ Addition
NAME			4.2 NAME	-08/27/98--01001--036	
STREET ADDRESS			4.3 STREET ADDRESS	***150.00	
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	598239900003	☐ Change ☐ Addition
NAME			5.2 NAME	-08/27/98--01001-032	
STREET ADDRESS			5.3 STREET ADDRESS	***150.00	
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (10/97)

14. 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 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.

SIGNATURE: Michael N. Wall Michael N. WALL 7-6-98 1-888-304-1997