## 2004 FOR PROFIT CORPORATION **FILED ANNUAL REPORT** Apr 26, 2004 08:00 AM Secretary of State DOCUMENT # F35756 1. Entity Name PRECISION INTERNATIONAL CORPORATION Principal Place of Business Mailing Address P.O. BOX 88685 748 TANAGER LANE WEST CHICAGO, IL 60185 CAROL STREAM, IL 60188 No Chg-P CR2E034 (10/03) 01272004 DO NOT WRITE IN THIS SPACE 4. FEI Number 59-2091658 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent WALL, JAMES J DO NOT WRITE 3919 SAN ROCCO DR., #34A PUNTA GORDA, FL 33950-7952 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent SIGNATURE.

Signature, typed or printed name of registered agent and title	If applicable. (NOTE Registered Agent signature	(NOTE Registered Agent signature required when reinstating)		• •
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution.   □	\$5.00 May Be Added to Fees	U00000128 <b>7</b> 37 04/26/04-80050-011	150.00
10. OFFICERS AND DIREC	CTORS			

10.	OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C WALL, JAMES J 3919 SAN ROCCO DR PUNTA GORDA, FL 33950
TITLE NAME STREET ADDRESS CITY-SI-ZIP	P WALL, MICHAEL N 748 TANAGER LN WEST CHICAGO, IL 60185
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WALL, MARLENE K 748 TANAGER LN WEST CHICAGO, IL 60185
TITLE NAME STREET ADDRESS CITY -S1 - ZIP	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

## DO NOT WRITE IN THIS SPACE

Applied For

\$8.75 Additional Fee Required

Not Applicable

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

4/22/04 SIGNATURE: