## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

(9)

Mailing Address

PRECISION DESIGN, INC.

Principal Place of Business

APPROVED AND FILED

97 JUN -4 PM 3: 55

SECRETARY OF STATE TALLAHASSEE, FLORIDA



12124 SW 1311 MIAMI FL 3318		12124 SW 13181 AVE. MIAMI FL 33108-6445						
U\$		US			3. Date Incorporated or Qualified 05/05/1982	3a. Date of Last Re 05/01/1996	epori	
9 Dringland Di	ace of Business	2a. Mailing Address	<del></del>		4. FEI Number		plied For	
_	ace of business	<b>⊢</b> ¬	26		59-2198035	<u> </u>	t Applicable	
21 Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Regulared			
City & State		City & State			6. Election Campaign Financing		<u> </u>	
23		28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip			8. This corporation has liability for intangible tax under s. 199.032,			
24	25	29	30		Florida Statutes Yes No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
PINDER, LOURDES V.				81 Name				
125	15 S.W. 88 STREET		82 Street Add		Idress (P.O. Box Number is Not Acceptable)			
MA	MI FL 33186		·					
			8:	3				
			84	City		85 Zip (	Code	
		·		1				
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 AND DIRECTORS	13.	jent signature re	quired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTOR	S IN 12	
12.	PD	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO CITION	☐ Change	Addition	
NAME	DIAZ, MARTIN A., JR.		1.2 NAME	]	5000022			
STREET ADDRESS	11794 SW 100TH ST.			T ADDRESS	-06/09/9	97011820	306	
CITY-ST-ZIP	MAMI FL		1.4 CITY			5.00 ****16		
TITLE	VO	DELETE	2.1 TITLE	31-211		☐ Change	Addition	
NAME	DIAZ, MARTIN A., SR.	<del></del>	2.2 NAME					
STREET ADDRESS	11500 SW 95TH ST.		2.3 STRE	T ADDRESS				
CITY-ST-ZIP	MIAMI FL		2. 4 CITY					
TITLE	STD	DELETE	3.1 TITLE			☐ Change	Addition	
NAME	DE DIAZ, LOURDES YABOR	YABOR 321						
STREET ADDRESS	11500 SW 95TH ST.			T AODRESS		•		
CITY-ST-ZIP	MIAMI, FL,		3.4. CITY	-ST-ZIP				
TITLE			4.1 TITLE			☐ Change	☐ Addition	
NAME			4. 2 NAM	E				
STREET ADDRESS			4.3 STRE	T ADDRESS				
CITY-ST-ZIP			4.4 CITY	ST-ZIP			<u> </u>	
TITLE		☐ DELETE 5.1 T				Change	Addition	
NAME			5.2 NAMI		_			
STREET ADDRESS			5.3 STRE	T ADDRESS	$\cap$ $\wedge$ $\wedge$			
CITY-ST-ZIP		<b>1</b>	5.4 CITY				A 4490	
TITLE		☐ DELETE	6.1 TITLE		, , ,	☐ Change	Addition	
NAME			6.2 NAMI		1,1419	/ <b>`</b> \		
STREET ADDRESS			9	ET ADDRESS	W (1)	* *		
CITY-ST-ZIP			6.4 CITY	ST-ZIP		. (4		

14. I do 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 frue 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 609, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.