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

**FILED PROFIT** May 05 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (9) PRECISION DESIGN, INC. Principal Place of Business Mailing Address 12124 SW 131ST AVE. 12124 SW 131ST AVE. MIAMI FL 33186 MIAMI FL 33186 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/05/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2198035 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Z+D Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PINDER, LOURDES V. 12515 S.W. 88 STREET Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33186** 83 Zip Code 11. Pursuant to the provisions of Sections 607.05:02 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 Horida 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 provide name of regularities agent and the diapplicable. (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 1.1 TITLE ΡD TITLE DIAZ, MARTIN A., JR. 1.2 NAME NAME 11794 SW 100TH ST. 1.3 STREET ADDRESS STREET ADDRESS MIAM! FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE DIAZ, MARTIN A., SR. 2.2 NAME NAME 11500 SW 95TH ST. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE ☐ Change Addition 3.1 TITLE TITLE STD DE DIAZ, LOURDES YABOR 3.2 NAME 11500 SW 95TH ST. 3.3 STREET ADDRESS STREET ADDRESS MIAMI, FL. 3 4. CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Channe 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZIP Addition Change DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

4/23/08 (305-256-9071)