

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

FILED
Feb 07 1997 8:00am
Secretary of State

DOCUMENT # **F93000002324 (2)**

1. Corporation Name:

PRIME ENGINEERING, INC. OF GEORGIA



Principal Place of Business

**1819 PEACHTREE ROAD, N.E., SUITE 610
ATLANTA GA 30309**

Mailing Address

**1819 PEACHTREE ROAD, N.E., SUITE 610
ATLANTA GA 30309-1850**

3. Date Incorporated or Qualified

05/18/1993

3a. Date of Last Report

03/18/1996

4. FEI Number

58-1876426

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 3500 Piedmont Road

Suite, Apt. #, etc.

22 Suite 701

City & State

23 Atlanta, GA

Zip

24 30305

Country

25 Fulton

2a. Mailing Address

26 3500 Piedmont Road

Suite, Apt. #, etc.

27 Suite 701

City & State

28 Atlanta, GA

Zip

29 30305

Country

30 Fulton

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
3870 MAGUIRE BLVD.
ORLANDO FL 32803**

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. TITLE ☐ DELETE

NAME **PCD** *same address*

STREET ADDRESS **1819 PEACHTREE ROAD, N.E., SUITE 610** *as above*

CITY-ST-ZIP **ATLANTA GA 30309**

TITLE ☐ DELETE

NAME **SD**

STREET ADDRESS **1819 PEACHTREE ROAD, N.E., SUITE 610**

CITY-ST-ZIP **ATLANTA GA 30309**

TITLE ☐ DELETE

NAME **D**

STREET ADDRESS **BRANSON, ALTON H**

CITY-ST-ZIP **1819 PEACHTREE ROAD, N.E., SUITE 610**

TITLE ☐ DELETE

NAME **D**

STREET ADDRESS **WILSON, JOHN T**

CITY-ST-ZIP **1819 PEACHTREE ROAD, NE SUITE 610**

TITLE ☐ DELETE

NAME **D**

STREET ADDRESS **PEASE, RICHARD**

CITY-ST-ZIP **1819 PEACHTREE ROAD, NE SUITE 610**

TITLE ☐ DELETE

NAME **D**

STREET ADDRESS **1819 PEACHTREE ROAD, NE SUITE 610**

CITY-ST-ZIP **ATLANTA GA 30309**

TITLE ☐ DELETE

NAME **D**

STREET ADDRESS **1819 PEACHTREE ROAD, NE SUITE 610**

CITY-ST-ZIP **ATLANTA GA 30309**

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/97 (404)869-1009
Date Daytime Phone #

CR2E034 (9/96)