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FILED
Apr 13 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 # F93000005348 (8)

1. Corporation Name

PRODUCT FABRICATION SERVICE CORPORATION

Principal Place of Business

2402 DANIELS ST.
MADISON WI 53704

Mailing Address

2402 DANIELS ST.
MADISON WI 53704

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/23/1993

4. FEI Number

39-1301594

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Country

24 53718

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Country

29 53718

30 Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
110 N. MAGNOLIA ST.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE CB
NAME STAROSTOVIC, EDWARD J JR.
STREET ADDRESS 2620 MARILYN DR.
CITY-ST-ZIP STOUGHTON WI ☐ DELETE

TITLE D
NAME MORRISON, VIRDEN
STREET ADDRESS 2200 WESTWOOD DR.
CITY-ST-ZIP WAUSAU WI 54401 ☐ DELETE

TITLE DST
NAME BLAIR, KATHLEEN
STREET ADDRESS 5213 ERLING AVE.
CITY-ST-ZIP MCFARLAND WI 53558 ☐ DELETE

TITLE D
NAME KRALJ, WILLIAM J
STREET ADDRESS 7416 WEST DAKOTA ST.
CITY-ST-ZIP WEST ALLIS WI 53219 ☐ DELETE

TITLE P
NAME SLIFKA, MICHAEL J P.E.
STREET ADDRESS 9 SUNDOWN CT., APT. #C
CITY-ST-ZIP MADISON WI ☐ DELETE

TITLE V
NAME ROTHMAN, JAMES A
STREET ADDRESS 3817 WEST JARGO ROAD
CITY-ST-ZIP DEERFIELD WI 53531 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 1641 W. Placita Beldad
2.4 CITY-ST-ZIP Green Valley, AZ 85614

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS 44 Hidden Hollow Trail
5.4 CITY-ST-ZIP Madison, WI 53717

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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.

SIGNATURE: Michael J. Slifka - President 1/30/98 (608) 721-3361

CR2E034 (10/97)