

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

FILED

Jul 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name D/B/A Precision Designs, Inc. Precision Designs of ALABAMA, Inc. Principal Place of Business Mailing Address 1515 Kowaliga Road Eclectic, AL 36024			
2. Principal Place of Business 21 15460 Aviation Loop Dr. Suite, Apt. #, etc.		2a. Mailing Address 28 1515 Kowaliga Road Suite, Apt. #, etc.	
22 City & State 23 Brooksville, FL		28 City & State Eclectic, AL	
24 Zip 34609		28 Zip 36024	
25 Country		30 Country	
3. Date Incorporated or Qualified 8/23/88 / 2-19-97		3a. Date of Last Report N/A First Report	
4. FEI Number 63-0985658		Applied For Not Applicable	
5. Certificate of Status Desired		Fee Required \$8.75 Additional	
6. Election Campaign Financing Trust Fund Contribution		May Be Added to Fees \$5.00	
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
9. Name and Address of Current Registered Agent Frank Wilson 4411 North Federal Hwy., Lot 25 Pompano Beach, FL 33064		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
11. Pursuant to the provisions of Sections 607.0602 and 607.1608, 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 607.0606, 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Brian Wilson 1515 Kowaliga Rd. Eclectic, AL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Geneva A. Wilson 1515 Kowaliga Rd. Eclectic, AL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200002233382 -07/09/97--01018--006 ***550.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 7-8
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: <u>Geneva A. Wilson</u> <u>GENEVA A. WILSON</u>		Date <u>6-30-97</u> Daytime Phone # <u>541-2917</u>	

CR2E034 (9/96)



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

February 19, 1997

MELISSA W. SMYLY
CAPELL, HOWARD, KNABE & COBBS, P.A.
PO BOX 2069
MONTGOMERY, AL 36102-2069

Qualification documents for PRECISION DESIGNS, INC. doing business in Florida as PRECISION DESIGNS OF ALABAMA, INC. were filed on February 19, 1997 and assigned document number F97000000880. Please refer to this number whenever corresponding with this office.

Your corporation is now qualified and authorized to transact business in Florida as of the file date.

A corporation annual report will be due this office between January 1 and May 1 of the year following the calendar year of the file date. A Federal Employer Identification (FEI) number will be required before this report can be filed. If you do not already have an FEI number, please apply NOW with the Internal Revenue by calling 1-800-829-3676 and requesting form SS-4.

Please be aware if the corporate address changes, it is the responsibility of the corporation to notify this office.

Should you have any questions regarding this matter, please telephone (904) 487-6091, the Foreign Qualification/Tax Lien Section.

Jennifer Sindt
Document Examiner
Division of Corporations

Letter Number: 297A00008808