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FILED  
Apr 25 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # J80732 (7)  
1. Corporation Name  
PRECISION FINISHING SYSTEMS, INC.



Principal Place of Business Mailing Address  
5127 S.W. ANHINGA 5127 S.W. ANHINGA  
PALM CITY FL 34990 PALM CITY FL 34990-4003

3. Date Incorporated or Qualified 07/02/1987  
3a. Date of Last Report 04/29/1996

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip 28 Zip  
24 Country 29 Country  
25 Country 30 Country

4. FEI Number 59-2829479  
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

9. Name and Address of Current Registered Agent  
R. KELLY COOK  
5127 SW ANHINGA  
PALM CITY FL 34990  
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 (NOT: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	NAME	COOK, R. KELLY	1.1 TITLE		1.2 NAME	
STREET ADDRESS	5127 SW ANHINGA			1.3 STREET ADDRESS		1.4 CITY - ST - ZIP	
CITY - ST - ZIP	PALM CITY FL			2.1 TITLE		2.2 NAME	
TITLE	STV	NAME	COOK, CHERYL L.	2.3 STREET ADDRESS		2.4 CITY - ST - ZIP	
STREET ADDRESS	5127 SW ANHINGA AVE			3.1 TITLE		3.2 NAME	
CITY - ST - ZIP	PALM CITY FL			3.3 STREET ADDRESS		3.4 CITY - ST - ZIP	
TITLE	D	NAME	COOK, CHERYL L.	4.1 TITLE		4.2 NAME	
STREET ADDRESS	5127 SW ANHINGA AVE			4.3 STREET ADDRESS		4.4 CITY - ST - ZIP	
CITY - ST - ZIP	PALM CITY FL			5.1 TITLE		5.2 NAME	
TITLE		NAME		5.3 STREET ADDRESS		5.4 CITY - ST - ZIP	
STREET ADDRESS				6.1 TITLE		6.2 NAME	
CITY - ST - ZIP				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 in an attachment with an address

CR2E034 (9/96)