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

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

TITLE

NAME

**FILED** Jul 02 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K42958 (4)PRIMETEC INDUSTRIAL, INC. Principal Place of Business Mailing Address % ROY SMITH % ROY SMITH 4241 CORPORATE SOUARE 4241 CORPORATE SQUARE DO NOT WRITE IN THIS SPACE NAPLES FL 33942 NAPLES FL 33942 3. Date Incorporated or Qualified 11/02/1988 2. Principal Place of Business 2a. Mailing Address Applied For 14848 US 41 21 14848 OID US 26 OID Not Applicable 65-0079154 \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State \$5.00 May Be 6. Election Campaign Financing ゲム NAPIES 23 Trust Fund Contribution Added to Fees Country S Country This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. □ No 25 29 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SMITH, ROY MINH 4241 CORPORATE SQUARE (P.O. Box Number is 82 NAPLES FL 33942 83 84 TAPLES 11. Pursuant to the provisions of Soctions 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 into obligations of Section 607.0505, Florida Statutes. 6-22-98 SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1 1 TITLE NAME **SMITH, ROY** 1.2 NAME 14848 010 US 41 STREET ADDRESS **4241 CORPORATE SQUARE** 1.3 STREET ADDRESS NAPLES FL 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE Addition NAME 2.2 NAME **SMITH.** KEN **4241 CORPORATE SQUARE** STREET ADDRESS 23 STREET ADDRESS NAPLES FL 2 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby 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 of suppliented an indicated on this annual report of suppliented 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 tristee 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, for on an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

Change

Addition

DELETE