

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

0581242

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED

99 JUL 13 PM 12:22

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # K42958

1. Corporation Name

PRIMETEC INDUSTRIAL, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business 14848 OLD US 41 7 NAPLES FL 34110 US		Mailing Address 14848 OLD US 41 7 NAPLES FL 34110 US	
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	Country
24	Country	29	Zip
25		30	
3. Date Incorporated or Qualified 11/02/1988		4. FEI Number 65-0079154	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$8.75 Additional Fee Required	
7. This corporation owes the current year Intangible Personal Property Tax <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax <input type="checkbox"/>		9. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, ROY  
14848 OLD US 41  
7  
NAPLES FL 34110

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 607.0502 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<input type="checkbox"/> DELETE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	D	1.1 TITLE	
NAME	SMITH, ROY	1.2 NAME	
STREET ADDRESS	14848 OLD US 41 7	1.3 STREET ADDRESS	800002931328--7
CITY-ST-ZIP	NAPLES FL 34110	1.4 CITY-ST-ZIP	-07/14/99--01081--002
TITLE	D	2.1 TITLE	*****550.00 *****550.00
NAME	SMITH, KEN	2.2 NAME	800002931328--7
STREET ADDRESS	14848 OLD US 41 7	2.3 STREET ADDRESS	-07/14/99--01081--003
CITY-ST-ZIP	NAPLES FL 34110	2.4 CITY-ST-ZIP	*****8.75 *****8.75
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-12-99

941-596-1050

CR2E034 (11/98)