FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # K81861 P & K HYDRAULICS, INC. Principal Place of Business Mailing Address C/O ALICE KAY PETERSON 16090 AVIATION LOOP DRIVE PO BOX 15450 BROOKSVILLE FL 34609-0118 BROOKSVILLE FL 34609 2. Principal Place of Business 2a. Mailing Address 21 26 Suite, Apt. #, etc. Suite, Apl. #, etc. 22 City & State City & State 23 28 Zip Country Zip Country 24 25 29 30 9. Name and Address of Current Registered Agent

FILED Apr 15 1998 8:00am Secretary of State



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DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/20/1989 4. FEI Number Applied For 59-2944018 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. □ No 10. Name and Address of New Registered Agent PETERSON, ALICE KAY **16090 AVIATION LOOP DRIVE** 82 Street Address (P.O. Box Number is Not Acceptable) **BROOKSVILLE FL 34609** 83 84 City 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 it applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 11 TITLE PETERSON, BERT NAME 1.2 NAME 7029 SPANISH MOSS LANE STREET ADDRESS 1.3 STREET ADDRESS **BROOKSVILLE FL** CITY-ST-ZIP 1.4 CITY - ST - ZIP DST DELETE Change Addition TITLE 2.1 TITLE PETERSON, ALICE KAY NAME 2.2 NAME 7029 SPANISH MOSS LANE STREET ADDRESS 2.3 STREET ADDRESS **BROOKSVILLE FL** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Addition 3.1 TITLE Change TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.9 TITLE Addition TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS 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 atfact ment with an address. Block 12 or Block 13 if changed, or on an al

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