File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY FILE()
SECRETARY OF STATE
DIVISION OF CORPORATIONS Katherine Harris, ANNUAL REPORT Secretary of State 1999 DIVISION OF CORPORATIONS 99 APR - I AM 8: 27 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #** PRECISION HOLDINGS GROUP, L.C. 1a. Principal Place of Business Address 10343 153RD COURT NORTH 10343 153RD COURT NORTH JUPITER FL 33478 JUPITER FL 33478 3. Date Organized or Qualified 08/11/1998 3a. State of Formation 2a. Mailing Address 2 Principal Place of Business FLSuite, Apt. #, etc. Suite, Ant. #, etc. 4. FEI Number Applied For City & State City & State Not Applicable 6. Certificate of Status Desired 5. Date of Last Report Country Country SB.75 Additional Fee Required 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office BRODIE, SIDNEY Z ESQ. 7270 NW 12TH STREET, PH-I Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33126 Suite, Apt #, etc City 9. Pursuant to the provisions of Sections 608 116 and 608 508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing ate of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment its registered office or registered age/t, or both in the \$ as registered agent, and accept thy DATE Managing Members/Managers Business Street Address City, State and Zip Code 10. Title 10343 153RD COURT NORTH JUPITER FL MGRM REID, SEAN E 100002836811--5 -04/12/99-01131--015 \*\*\*\*188.75 \*\*\*\*188.75 11. Ido hereby certify that the information supplied with this filing dees not a failty for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an

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attachment with an address.

SIGNATURE:

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