2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 20, 2004 8:00 am Secretary of State

ANNUAL KEPUKI							01-20-2004 90073 027 ***150.00				
DOCUMENT # P01000032419 1. Entity Name PRECISION CRAFT, INC.								J1-20-2004 90C	- ·	- -	O
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Principal Place of Business 3. Mailing Address						<u></u>					(61) (64)
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City & State				City & State			4. FEI Number 59-371				plied For t Applicable
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					<u> </u>		· <u> </u>	<u></u>		Fee Require	d
	b. Name a	and Address of Curre	ered Agent	7. Name and Address of New Registered Agent Name							
ÉWALD, STEVE						TYANTE					
204 160TH AVE						Street Address (P.O. Box Number is Not Acceptable)					
REDINGTON BEACH, FL 33708						<u> </u>					
						<u> </u>					
						City		-	FL	Zip Code	•
9 The above	named entity	cultimite this etatement	for the n	urnosa of abanging ita	ragistar	ed office or regist	ared agent or be	the in the State of Ele		fomiliar with	and annual
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.											
"SIGNATURE.	Signature, bined of	r printed name of registered and	annlicable (NOT	nd Artent cignature require	red when reinstellars)		DATE		 [
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees											
10.		OFFICERS AN	D DIBEC	TORS	11.	 _	ADDITIONS/	CHANGES TO OFFI	CEBS AND	DIRECTORS	3 IN 11
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.											
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SIGNATURE: SIGNATURE AND TYPED OR PHINTED MAKE OF SIGNING OFFICER OR DIRECTOR Date Date Dayline Proces											