2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000104432

1. Entity Name
PRECISION GRAPHIX OF DESTIN, INC.

Principal Place of Business	Mailing Address
625 HIGHWAY 98 E SUITE 6	PO BOX 5178
DESTIN, FL 32541	DESTIN, FL 32540

DO NOT WRITE IN THIS SPACE

05052005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
01-0559359	Not Applicable

5. Certificate of Status Desired ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

PRESCOTT, JEFFREY
87 BARRACUDA ST
DESTIN, FL 32541

DO NOT WRITE IN THIS SPACE

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, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $550.00
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	PRESCOTT, JEFFREY
STREET ADDRESS	625 HIGHWAY 98 E SUITE 6
CITY-ST-ZIP	DESTIN, FL 32541
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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NAME	
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CITY-ST-ZIP	

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05/10/05-80007-001 600.00

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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

SIGNATURE: _____ JEFFREY PRESCOTT 5-6-05 850 837 649

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #