2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 06, 2004 8:00 am **Secretary of State** DOCUMENT # P02000089133 ** 02-06-2004 90009 022 ***158.75 PRECISION STAIRS, INC. Principal Place of Business Mailing Address 4523 30TH STREET-W.-11005 BRISTOL BAY DRIVE UNIT A-119 **BRADENTON FL 34207** BRADENTON FL 34209 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. MOORE CR2E034 (11/03) City & State 4. FEI Number Applied For 02-0638005 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent COOK, RANDALL Street Address (P.O. Box Number is Not Acceptable) 11005 BRISTOL BAY DR #612 **BRADENTON FL 34209** Zip Code FL 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, 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. **PSTD** TITLE ☐ Delete TITLE Change Addition COOK, RANDALL B NAME NAME STREET ADDRESS 4523 30TH STREET W., UNIT A-119 STREET ADDRESS CITY-ST-ZIP **BRADENTON FL 34207** CITY-ST-ZIP Barasda FL 34237 ۷D ☐ Delete TITLE ☐ Change ☐ Addition DIXON, DAN NAME NAME 1142 Snead Ave. STREET ADDRESS 4523 30TH STREET W., UNIT A-119 STREET ADDRESS **BRADENTON FL 34207** CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

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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: REDB M. Randall B. Cook