FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P07084

(7)

PRECISION RESISTOR COMPANY

Principal Pir 10601 75TH S LARGO FL 34		Mailing Address 10801 75TH STREET N. LARGO FL 33777-1421							
						3. Date Incorporated or Qualified 08/13/1985		ate of Last R 01/1996	leport
·······	Place of Business	2a. Maiting Address	***************************************			4. FEI Number		Ar	oplied For
21 Suite Au	t # oto	Suite, Apt. #, etc.				22-1207860		, L	ot Applicable
Suite, Apt #, etc.		·	27			5. Certificate of Status Desired		4 - · -	Additional equired
City & St	ate	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip Country 25		Zip	Zip Country 30			8. This corporation has liability for introgible tax under s. 199.032, Florida Statutes Yes			
[24]	9. Name and Address of Curre		30]			10. Name and Address of New F			
WR	IGHT, ROBERT L.		81	Nam	е	· · · · · · · · · · · · · · · · · · ·	· 	······································	
	01 75TH STREET, NORTH		82	Stree	t Addre	ss (P.O. Box Number is Not Accept	able)		
LAF	IGO FL 34647								
			83						
			84	City			FL	85 Zip (Code
agent. † SIGNATURE 12. TITLE	Fe, typed or printed name of registered ag				ure require	d when reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND	DIRECTOR	RS IN 12
NAME	DUSENBERRY, F. A.		1,2 NAME						
STREET ADDRESS			1.3 STREE	T ADDRESS	s				
CITY - S1 - ZIP	LARGO FL		1.4 CITY-	ST-ZIP				-	****
TILE	VD Dusenberry, F. A. III	DELETE	2.1 TITLE					Change	Addition
NAME STREET ADDRESS	ALIA LALIBA ALBIE DO		2.2 NAME 2.3 STREE	T ADDDECS	اء				
CHY-SI-ZIP	SEMINOLE FL		2.4 CITY-		,				
TITLE	STD	DELETE	3.1 TITLE	<u> </u>		***************************************		Change	Addition
NAME:	WRIGHT, R. L.		3.2 NAME			I			
STREET ADDRESS			3.3 STREE		S				
CITY - ST - ZIP TITLE	LARGO FL	☐ DELETE	3.4. CITY- 4.1 TITL€	ST-ZIP				Change	Addition
NAMÉ			4.1 IIILE 4. 2 NAME					LJ Change	LI AUGILION
STREET ADDRESS	<u> </u>		4.3 STREE		s .				
CITY - S1 - ZIP			4.4 CITY-1						
THLE		DELETE	5.1 TITLE					Change	Addition
NAME			5.2 NAME						
STREET ADDRESS	S		5.3 STREE		\$				
CITY-ST-ZIP		DELETE	5.4 CITY -: 6.1 TITLE	ST-ZIP				Change	Addition
NAME		Secured 100 to to the P In	6.2 NAME					- many	
STREET ADDRESS	s		6.3 STREE	T ADORESS	s				
CITY C1 7(0)			0.4.0(7)						

14. Ido 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 attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER ON DIRECT

S.V.

4/28/97 813541-5771

FILED

May 02 1997 8:00am

Secretary of State

Daytime Phone #

3R2E034 (9/96)