FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 JUN 16 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # D34414

1. Corporation Name
Perfection HY-Test

100001518181
-06/20/95--01108--024
****225.00 ****225.00
DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1943-C Hoffmeyer Road **P. O. Box 6196** **Florence, SC 29501**	**1943-C Hoffmeyer Road** **P. O. Box 6196** **Florence, SC 29501**

3. Date Incorporated or Qualified: **5-19-89**
3a. Date of Last Report: **3-26-93**

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: **57-0835032** ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
City & State (23)
City & State (28)
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
Zip (24) Country (25) Zip (29) Country (30)
8. This corporation has liability for intangible tax under § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

The Prentice-Hall Corporation System, Inc.
110 North Magnolia Street
Tallahassee, FL 32301

10. Name and Address of New Registered Agent

81 Name: **The Prentice Hall Corporation System, Inc.**
82 Street Address (P.O. Box Number is Not Acceptable): **1201 Hayes Street**
83 **Suite 105**
84 City: **Tallahassee** **FL** 85 Zip Code: **32301**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: (Signature typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when necessary) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	11 TITLE	☐ Change ☐ Addition
NAME	Pritzker, Robert A.	12 NAME	
STREET ADDRESS	225 W. Washington St.	13 STREET ADDRESS	
CITY ST ZIP	Chicago, IL	14 CITY ST ZIP	
TITLE	P	21 TITLE	☐ Change ☐ Addition
NAME	Peacock, James H.	22 NAME	
STREET ADDRESS	1943-C Hoffmeyer Road	23 STREET ADDRESS	
CITY ST ZIP	Florence, SC 29501	24 CITY ST ZIP	
TITLE	V/T	31 TITLE	☐ Change ☐ Addition
NAME	Gluth, R. C.	32 NAME	
STREET ADDRESS	225 W. Washington St.	33 STREET ADDRESS	
CITY ST ZIP	Chicago, IL	34 CITY ST ZIP	
TITLE	V	41 TITLE	☐ Change ☐ Addition
NAME	Pethick, D. W.	42 NAME	
STREET ADDRESS	225 West Washington St.	43 STREET ADDRESS	
CITY ST ZIP	Chicago, IL	44 CITY ST ZIP	
TITLE	S	51 TITLE	☐ Change ☐ Addition
NAME	Webb, Robert W.	52 NAME	
STREET ADDRESS	225 W. Washington St.	53 STREET ADDRESS	
CITY ST ZIP	Chicago, IL	54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: James H. Peacock — **5/24/95** (Date) — **803-665-5543** (Daytime Phone #)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR