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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9300005857 (6)

ATLANTIC PRECISION & MANUFACTURING, INC.

FILED Jan 26 1998 8:00am Secretary of State



Principal Place of Business			Mailing Address				1.00000000	aniesat iin ining eizet abilt abilt abilt abint aller biidt feiet atelt ibåt ibåt			
292 N. WICKHAM RD MELBOURNE FL 32935 US			292 N. WICKHAM ROAD								
			MELBOURNE FL 32935 US				DO NOT WRITE IN THIS SPACE				
00			US				3. Date Incorr	orated or Qualified			
							01/21/1				
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Numbe			I IA	pplied For	
21			26				59-312				of Applicable
			Suite, Apt. #, etc.					of Status Desired		\$8.75	Additional
Obs. 1 Obs.			27				S, Continoate (or oratios position		Fee R	equired
City & State			City & State				mpaign Financing		\$5.00	May Be	
Zip Country			28				Contribution			to Fees	
24	├ ─┐	nuy	Zip	<u> </u>	Country	1		ation owes or has pa			_ ·
24	9, Name and Add	dress of Current	29 Registered Ac		30			operty Tax due June Address of New Re			_] No
	APPS, STEWART B				B1	Nam		Addiess of Herr Inc	Alstelen	Maiir	
	7 N HWY A1A										
STE 204			8			Stree	Street Address (P.O. Box Number is Not Acceptable)				
INDIALANTIC FL 32903					83						
W11	DIABANTO IL SEN	,									
					84	City			FL	85 Zip	Code
11. Pursuant	to the provisions of S	ections 607.0502	and 607 1508.	Florida Statutes	the above	l e-name	d corporation submits thi	s statement for the r	OUTDOSS C	f changing it	ts registered
OTICE OF F	egi ste red agent, or be m fam iliar with, and a	otn, in the State o	t Florida, Such	change was au	thorized by	z the co	orporation's board of direct	ctors. I hereby acce	pt the app	pointment as	registered
SIGNATURE					oa Statute	3.					
	Signature, typed or printed ru			(NOTE		ant signatu	are required when reinstating)		DATE		
12.	DP	OFFICERS AND		DELETE	13.		ADDITIONS/0	CHANGES TO OFFIC	CERS ANI		
NAME :	GUNIA, GLADY:	c	L	_ DELETE	1.1 TITLE					Change	Addition
					1.2 NAME						
STREET ADDRESS	PALM BAY FL	IULE, NE			1.3 STREET		,				
CITY-ST-ZIP TITLE	TAUM DATE	· · · · · · · · · · · · · · · · · · ·		DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP				Change	A delicion
NAME	GUNIA, MIKE		_		2.2 NAME					Change	Addition
STREET ADDRESS	837 VANCE CIF	CIE NE				1000000					
CITY-ST-ZIP	PALM BAY FL	IOLL IIL			2.3 STREET						•
TITLE	S			DELETE	2. 4 CITY - S 3.1 TITLE	51 - 7IP				Change	Addition
NAME	PRINCE, VERNO	JN G	•		3.2 NAME					L. Change	
STREET ADDRESS	535 WISTAR CT				3.3 STREET	ADODECC					İ
CITY-ST-ZIP	PALM BAY FL	'			3.4. CITY - S		İ				
TITLE	AS			DELETE	4.1 TITLE	11-EII				Change	Addition
NAME	HERNANDEZ, S	ILVANA	_	•	4 2 NAME						
STREET ADDRESS	615 SAND PIPE		1		4.3 STREET	ADDRESS					
CITY-ST-ZIP	PALM BAY FL				4.4 CITY-S						
TITLE				DELETE	5.1 TITLE					Change	☐ Addition
NAME					5.2 NAME						
STREET ADDRESS					5.3 STREET	ADDRESS					
CITY-ST-ZIP					5.4 CITY - S						
TITLE				DELETE	6.1 TITLE					Change	Addition
NAME					6.2 NAME						_
STREET ADDRESS					6.3 STREET	address					
CITY-ST-ZIP					6.4 CITY-S						

14. 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 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.