PROFIT. CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P93000075971

PRECISION ENGINE REBUILDING, INC.

Principal Place		Mailing Address							
116 WEST COMPTON AVE. 116 WEST COMPTON AVE. ORLANDO FL 32806 ORLANDO FL 32806									
UNDANDO PE SEGO					DO NOT WRITE IN THIS SPACE				
					<ol> <li>Date Incorporated or Qualifed 11/03/1993</li> </ol>				
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	•	Apr	olied For	
21	26			59-3208976		Not	Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75 A		
22		27			5. Certifcate of Status Desired		Fee Red	puired	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 M Added to			
Zip	Country	Zip	Cour	ntry	8. This corporation owes the current	year Intang	jible		
24	25	29 3	0		Personal Property Tax.		] Yes	<b>X</b> No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	istered Ag	ent		
MONROE, STEVE 116 W COMPTON AVE ORLANDO FL 32806				81 Name 82 Street Addr 83	ress (P.O. Box Number is Not Acceptable	<del>)</del>			
				84 City			85 Zip C		
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations.	of Florida. Such change was autt	norized	by the corporation	poration submits this statement for the pu on's board of directors. I hereby accept t	rpose of cha he appointm	anging its r lent as reg	registered jistered	
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agen					ature required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12.	OFFICERS AND DIRECTORS  DP DELETE		13.		ADDITIONS/CHANGES TO OFFIC		T Change	Addition	
TITLE	MONROE, STEVEN	- Bette	1			_			
NAME	116 W. COMPTON AVE.		1.2 NAJ					ļ	
STREET ADDRESS	ORLANDO FL 32806			REET ADDRESS					
CITY-ST-ZIP			2.1 TIT	Y-ST-ZIP			Change	Addition	
TITLE			2.2 NA					_	
NAME				REET ADDRESS					
STREET ADDRESS			1	Y-ST-ZIP				ĺ	
CITY-ST-ZIP		☐ DELETE	3.1 TIT			Γ	Change	☐ Addition	
TITLE NAME			3.2 NA			_	- •	_	
· ·				REET ADDRESS				I	
STREET ADDRESS				Y-ST-ZIP				1	
CITY-ST-ZIP TITLE		□ DELETE	4.1 TIT				Change	Addition	
			4. 2 NA					_	
NAME STREET ADDRESS				REET ADDRESS				Ì	

CITY-ST-ZIP 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that I am an officer or director of the corporation of 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 or an attachment with an address, with all other like empowered.

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE: \_\_\_\_\_\_

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

DELETE

☐ DELETE

STEVEN MONROE

Change

☐ Addition

☐ Addition

May 07, 1999 8:00 am Secretary of State

05-07-1999 90040 029 \*\*\*150.00