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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000002583 (9)

FILED Apr 22 1998 8:00am Secretary of State

MRC PRECISION METAL OPTICS, INC.						
		_				
Principal Place of Business Mailing Address					1 (03)(50) 140 (0)(0) Balla 00(4) 00(4) 03(4) Balla 1	IBILA LIBAT AKIBI YEKBA KIN KARI
6455 PARKLAND DRIVE 6455 PARKLAND DRIVE SARASOTA FL 34243 SARASOTA FL 34243					DO NOT WRITE IN THI	IS SDACE
					3. Date Incorporated or Qualified	IS SPACE
					01/01/1995	
2.	Principal P	lace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	Applied For
21	· · · · · · · · · · · · · · · · · · ·		26		65-0546160	Not Applicable
 -''	Sulte, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75 Additional
22			27		5. Certificate of Status Desired	Fee Required
	City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23			28		Trust Fund Contribution	Added to Fees
_	Zip	Country	Zip	Country	8. This corporation owes or has paid the o	
24		25		30	Personal Property Tax due June 30.	Yes □ No
		9. Name and Address of Curi	ent Registered Agent		10. Name and Address of New Registere	d Agent
		AL, GARY W		81 Name		
	2070 RINGLING BOULEVARD			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
	SA	Ra\$O TA FL 34237		83		
				83		
ŀ				84 City		85 Zip Code
	Durayant	to the provisions of Costions CO2 C	EOO and CO7 tEOO Florida Platito		F	
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 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 a agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						ppointment as registered
l	agent. I a	im familiar with, and accept the ob-	ligations of, Section 607.0505, Flor	ida Statutes.		
SI	3NATURE	Signature, typed or printed name of registered	eunts and title danglingble (NOTE:	Registered Agent signature requir	od when reinstating) DATE	
12			ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TIT	E	PD	DELETE	1.1 TITLE		Change Addition
NA.	AE .	MONTONE, FRANK E		1.2 NAME		
STE	EET ADDRESS	64 55 Parkland Dr.		1.3 STREET ADDRESS		
CIT	Y-ST-ZIP	SARASOTA FL 34243		1.4 CITY-ST-ZIP		
TIT	E	8	☐ DELETE	2.1 TITLE		Change Addition
NA	AE .	MONTONE, BONNIE J		2.2 NAME		
STF	EET ADORESS	6455 PARKLAND DR.		2.3 STREET ADDRESS		
	(-\$T-ZIP	SARASOTA FL 34243		2. 4 CITY-ST-ZIP		
TIT	•		DELETE	3.1 TITLE		Change Addition
NAI				3.2 NAME		
	EET ADDRESS			3.3 STREET ADDRESS		
_	Y-ST-ZIP		Therese	3.4. CITY-ST-ZIP	**************************************	
TIT			DELETE	4.1 TITLE		Change Addition
NAI				4. 2 NAME		
1	EET ADDRESS			4.3 STREET ADDRESS		
	(-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TITI			☐ pereit	5.1 TITLE		Change Addition
NAJ	1			5.2 NAME		
	EET ADDRESS			5.3 STREET ADDRESS		
TITL	(-ST-ZIP		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		☐ Change ☐ Addition
NAI			- Victor	6.2 NAME		E CHANGE T VOCICION
	EET ADORESS			6.3 STREET ADDRESS		
	-ST-ZIP					
		sertify that the information supplied	with this films does not qualify for	6.4 CITY-ST-ZIP	Section 119 07(3)(i) Florida Statutes I further	certify that the information

4. I bereby 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.

CICALATURE, True A M T FRANK MONTAND