## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 24, 2008 08:00 A Secretary of State DOCUMENT # P95000094254 PRECISION PARTNERS, INC. Principal Place of Business Mailing Address 230 ERNESTINE STREET 230 ERNESTINE STREET ORLANDO, FL 32801 ORLANDO, FL 32801 CR2E034 (11/05) 01112008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3358636 Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE KATZ, JACK 230 ERNESTINE STREET ORLANDO, FL 32801 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PD TITLE KATZ, JACK NAME STREET ADDRESS 230 ERNESTINE STREET U00000793081 CITY-ST-ZIP ORLANDO, FL 32801 01/24/08-80034-013 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP TITLE

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP