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

**PROFIT** CORPORATION ANNUAL REPORT

City-St-ZiP



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 09 1997 8:00am

Secretary of State

1-31-97 813-585-7352

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P95000096904 (4)

KP PRECISION MACHINING, INC.

Principal Place of Business Mailing Address 13291 93RD ST N 13291 93RD ST N LARGO FL 33773-1326 LARGO FL 34043 3. Date Incorporated or Qualified 3a. Date of Last Report 01/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 26 Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be  $\Box$ Trust Fund Contribution Added to Fees 23 28 Country  $Z_{\rm IP}$ B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes 🔀 No 30 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name PEREZ, FERNANDO III PREECE **401 E JACKSON ST** Street Address (P.O. Box Number is Not Acceptable)
7870 Shadow Bun De 82 **SUITE 2400** 83 **TAMPA FL 33602** 84 arbo 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 (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE \_\_\_ Change Addition ℩ℷℸℼℙℙ∕∨ TITLE Kenneth Preece 1.2 NAME NAME 7876 Shadow Run De. 13 STREET ADDRESS STREET ADDRESS Largo FL 33773 CITY - \$1 - 7(6) 1.4 CITY-ST-ZIP DELETE 21 TITLE T/S Change Addition T/S THUE Jane Presce 1876 Shadow Run De. 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS Lar60 FL 33773 2.4 GITY-ST-ZIP City - \$1 - 7/P DELETE Change Addition 3.1 TITLE गाए 3.2 NAME NAM: 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CHY-SI-ZIP Addition DELETE Change 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP Dity-ST-7P DELETE 5.1 TITLE Change Addition THEF 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST-ZIP CITY - ST - ZIP Addition DELETE 6.1 TITLE ☐ Change TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 a attachment with an address.