2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 04, 2006 08:00 AM Secretary of State

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PRECISION OPTICAL PLATING, INC.



Principal Place of Business

2060 B WHITFIELD PK. AVE SARASOTA, FL 34243

Mailing Address

1743 NORTHGATE BLVD SARASOTA, FL 34234



DO NOT WRITE IN THIS SPACE

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03292006	No Chg-P	CR2E034 (11/0

4. FEI Number 65-0675757

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LOWERY, DAVID A 1743 NORTHGATE BLVD SARASOTA, FL 34234

SIGNATURE:

DO NOT WRITE 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_	Signature, typed or printed name of registered agent and title	spolicable (NOTE Registered /	gent signature	required when reinstating)	DATE		
	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution,	ing 🗆	\$5.00 May Be Added to Fees	U00000491563 04/19/06-80027-012 156	8.75	
10. THE NAME STREET ADDRESS CHY-ST-ZIP THE NAME STREET ADDRESS CHY-ST-ZIP	OFFICERS AND DIRECT D LOWERY, DAVID A 1743 NORTHGATE BLVD SARASOTA, FL 34234 D LOWERY, J 1743 NORTHGATE BLVD SARASOTA, FL 34234	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE		
title Name Scheet adoress City-St-Zip							
NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby of indicated of the corphanged,	certify that the Information supplied with this ti on this report or supplemental report is true a poration or the receiver or trustee empowers or on an attachment with an address, with all	ling does not qualify for the exer and accurate and that my signatu to execute this report as require ather like empowered.	nptions co e shall ha d by Chap	ntained in Chapter 11 ve the same legal effe iter 607, Florida Statut	 Florida Statutes. I further certify that the ir of as if made under cath; that I am an officer es; and that my name appears in Block 10 or 	nformation or director Block 11 if	

Jonah Lover