ND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. DUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Sep 10, 1999 8:00 am Secretary of State

09-10-1999 90009 031 ***150.00

Applied For Not Applicable \$8:75-Additional Fee Required \$5.00 May Be Added to Fees

Zip Code

614232 - 90009 - 31

1999 CUMENT # P98000001758

RECISION CUSTOM DESIGN, INC.

CORAL SPRINGS FL 33065

| ipal Place of Business | | Mailing Address | | | | , | | |
|---|----------------------|---|----------|-------|---|---|--|--|
| W 43RD STRE Springs Fl | | 9002 SW 43RD STREET CORAL SPRINGS FL 33065 | | | | DO NOT WRITE IN THIS SPACE | | |
| | **Address Inco | orrect** | ect** | | | 3. Date Incorporated or Qualified | | |
| | 8002 NW 43 St | reet | | | | 01/05/1998 | | |
| incipal Place | of Bushess 1 Springs | 22. Mailing Address 5 | | | | 4. FEI Number Applied | | |
| , | | 26 | | | | 65~0811004 Not App | | |
| uite, Apt. #, et | c: | Suite, Apt-#, etc. | | | <u></u> | 5. Certificate of Status Desired \$8.75 Addit Fee Require | | |
| ty & State | | City & State | | | | 6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fe | | |
| p | Country | Zip 29 | 30 Co | untry | | 8. This corporation owes the current year Intangible Personal Property. Yes YN No | | |
| 9. Name and Address of Current Registered Agent | | | | Τ_ | | 10. Name and Address of New Registered Agent | | |
| FILMER, RONALD E 8002 SW 43RD STREET | | | 81 82 | | Name Street Address (P.O. Box Number is Not Acceptable) | | | |

Address Incorrect 8002 NW 43 Street Pursuant to the provisions of sections 607.0502 and 607.1508, Fionda 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.

83

City

| | | | | | 1 | | | | |
|--|--|--------|------------------------------|--------------------------------|--------------------|--|--|--|--|
| ATURE | O and the state of a section of the state of | NO: | TE: Registered Agent signatu | ure required when reinstation) | DATE | | | | |
| Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | | | | | | | |
| | PSTD | DELETE | 1,1 TITLE | | X Change Addition | | | | |
| | FILMER, RONALD E | | 1.2 NAME | | | | | | |
| ADDRESS | 8002 SW 43RD STREET | | 1,3 STREET ADDRESS | 8002 NW 43 Street | Į į | | | | |
| -ZIP | CORAL SPRINGS FL 33065 | | 1.4 CITY-ST-ZIP | Coral Springs, FL | 33065 | | | | |
| | ··· | DELETE | 2.1 TITLE | VP | Change XX Addition | | | | |
| | 4 % | | 2.2 NAME | Michael Filmer | ļ | | | | |
| ADDRESS | | _ | 2.3 STREET ADDRESS | 1275 SW 46 Avenue | #2606- | | | | |
| -Z!P | | | 2.4 CITY-ST-ZIP | Pompano Beach, FL | 33069 | | | | |
| | | DELETE | 3.1 TITLE | | Change Addition | | | | |
| | | | 3.2 NAME | | | | | | |
| ADDRESS | | | 3.3 STREET ADDRESS | į | 1 | | | | |
| -ZIP | | | 3.4 CITY-ST-ZIP | · | | | | | |
| 12 | · | DELETE | 4.1 TITLE | | Change Addition | | | | |
| | | | 4.2 NAME | | | | | | |
| ADDRESS | | | 4.3 STREET ADDRESS | | | | | | |
| -ZIP | | | 4.4 CITY-ST-ZIP | | | | | | |
| | | DELETE | 5.1 TITLE | | Change Addition | | | | |
| | | | 5.2 NAME | (, | | | | | |
| ADDRESS | | | 5.3 STREET ADDRESS | | | | | | |
| -ZIP | <u> </u> | | 5.4 CITY-ST-ZIP | | | | | | |
| | | DELETE | 6.1 TITLE | 1 | Change Addition | | | | |
| | | | 6.2 NAME | 1 | } | | | | |
| ADDRESS | | | 6.3 STREET ADDRESS | | | | | | |
| -ZIP | | | 6.4 CITY-ST-ZIP | | | | | | |

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 dicated 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 n 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 a Block 12 or Block 13 if charges or on an attachment with an address.

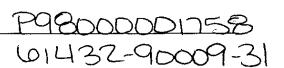
NATURE

FILMER

BLOCK & BRAND, P.A.

Certified Public Accountants

1044 Northeast Fifteenth Avenue • Fort Lauderdale, Florida 33304 (954) 761-1749 • Fax (954) 761-8131



Nancy B. Block, C.P.A. Jane M. Brand-Eagon, C.P.A.

August 10, 1999

Division of Corporations Annual Reports Filing P.O. Box 1500 Tallahassee, FL 32302-1500

RE: Precision Custom Design, Inc.
Document # P98000001758

Gentlemen:

This letter is written at the request of your customer service section. As explained, the taxpayer never received his first Annual Report to be filed. His attorney contacted the Division to find that the address was not correct for mailing purposes. Please note the Articles of Incorporation reflect the correct address. The Division then mailed out a second Annual Report with the same incorrect address requiring a filing fee and late fee totaling \$550.

After talking with your customer service section, they instructed the taxpayer to file the report (see address corrections on report) and attach this letter of explanation and the original Annual Report fee of \$150, which is attached.

If there are any further problems, please contact the taxpayer immediately.

Thank you.

Very truly yours,

BLOCK & BRAND, PA

Naney B. Block. CPA

NBB/lk .

cc: Precision Custom Design, Inc.