

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000099162

Entity Name: PRECISION HOT STAMP, INC.

FILED
Oct 20, 2005
Secretary of State

Current Principal Place of Business:

800-F BELL ROAD
F
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

800-F BELL ROAD
F
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 65-0880241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SEE, MICHAEL E
234 COOLIDGE DRIVE
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

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.

SIGNATURE: MICHAEL SEE

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP (X) Delete
Name: STOLLENWERK, JOSEF
Address: 344 SPRING BRANCH DR
City-St-Zip: CANTON, GA 30015

Title: D (X) Delete
Name: STOLLENWERK, RENATE
Address: 344 SPRING BRANCH DR
City-St-Zip: CANTON, GA 30015

Title: P () Delete
Name: SEE, MICHAEL
Address: 234 COOLIDGE DRIVE
City-St-Zip: SARASOTA, FL 34236

Title: ST (X) Delete
Name: SCHWARZ, TAYLOR
Address: 11831 NORTHEAST 85TH TERRACE
City-St-Zip: BRONSON, FL 32621

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL SEE

Electronic Signature of Signing Officer or Director

PRES

10/20/2005

Date