PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name

DOCUMENT # **S36077**



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS**

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

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90224 047 ***150.00

RIVERSI	DE PRECISION MACHINE,	INC.		_			
Principal Place	of Business	Mailing Address	·		i indivite ind litte mille date cant som	. #}B() B(B() B(B() B(B() B(B()	(1 81911 1861
4504 28TH ST W 4504 28TH ST. W BRADENTON FL 34207 US US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
					03/04/1991		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Appl	lied For
26					65-0248657	Not /	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 Ad	
27						Fee Keqt	
City & State		City & State	<u>⊢</u> ₁ ·		6. Election Campaign Financing	\$5.00 M Added to	
23		28	28		Trust Fund Contribution		rees
Zip Country Zip			The state of the s		⊒No I		
24	9. Name and Address of Curr	29 3 ent Registered Agent	<u> </u>	-	10. Name and Address of New Regis		
	o. Hame dita rida cada or auri		81	Name			
LIPKE, ROBERT E			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
	35TH AVE WEST			Ollock Ad	arous (1.0. Dox ramper to recruit to be partially		·
BRAI	DENTON FL 34205		83				}
	•		84	City		85 Zip Co	ode
					the state of the s	FL B E FC	ogistered
office or r	edictored agent or both in the Sta	te of Florida. Such change was auti	norizea DV	tne comora	rporation submits this statement for the purpation's board of directors. I hereby accept the	appointment as regi	stered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, Florid	la Statutes.				
SIGNATURE	Division of violated	good and title if continues (NOTE: P	agistered Agen	t signatura regu	lied when reinstating) Di	ATÉ	
12.	Signature, typed or printed name of registered a OFFICERS A	AND DIRECTORS	13.	(signature requ	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR	RS IN 12
TITLE	PTS	☐ DELETE 1.1 TI				☐ Change	Addition
NAME	LIPKE, ROBERT E	1.2 NA					
STREET ADDRESS	3120 35TH AVE WEST		1.3 STREET	ADDRESS			
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-ST	r-ZIP			
TITLE	D	DELETE 2.1 TI				Change	☐ Addition
NAME	LIPKE, GWEN A			ļ			{
STREET ADDRESS	4235 127TH SW			ADDRESS			
CITY-ST-ZIP	0022.72		2. 4 CITY-S	T-ZIP		- Clobara	☐ Addition
TITLE	D			{		. Change	[] Addidon [
NAME	CHITE, WILDIAM.		3.2 NAME	1	•		
	ADDRESS 4235 127TH STREET		3.3 STREET	-	an White		
CITY-ST-ZIP			3.4. CITY-S 4.1 TITLE	T-ZIP		Change	¬ ☐ Addition
TITLE	,		4.1 TILE 4.2 NAME	Ì			
NAME			4.3 STREET	ADDRESS			1
STREET ADDRESS			4.4 CITY-S1	1			ļ
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	1-21		☐ Change	Addition
NAME	-		5.2 NAME	Ĺ	•	•	
STREET ADDRESS			5.3 STREET	ADDRESS	•		i
CITY-ST-ZiP			5.4 CITY-ST	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE	- ·		☐ Change	☐ Addition
NAME			6.2 NAME	.			
STREET ADDRESS			6.3 STREET	ADDRESS			l
CITY-ST-ZIP			6.4 CITY-ST	T-ZIP			

14. I 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 an attachment with an address, with all other like empowered.

SIGNATURE:

ROBERT E. LIPKE 4/27/99