CR2E034 (11/98)

Apr 25, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **S99642**

1. Corporation Name

PRECISION HOLDINGS, INC.

11120101	on nocomoc, mo.							
Principal Place	of Business	Mailing Address				i dig ildi bibli di	INI BIBII DIBII O	il 011 01011 1001
2907 BAY TO B		2907 BAY TO BAY BLVD						
200	and belo	200						
TAMPA FL 33629 TAMPA FL		TAMPA FL 33629	PA FL 33629		DO NOT WR		SPACE	
US		US			3. Date Incorporated or Qualifed			
		T			12/11/1991			alla d Cas
—- ·	ace of Business	2a. Mailing Address			4. FEI Number			plied For
21 Suite Ant		Suite, Apt. #, etc.			59-3096593	_	\$8.75	t Applicable
Suite, Apt.		27 Suite, Apr. #, etc.			5. Certifcate of Status Desired		Fee Re	
City & State		City & State			6. Election Campaign Financing	_	\$5.00	
23	-	28			Trust Fund Contribution		Added t	
Zip	Country	Zip	Countr	у	8. This corporation owes the curr	rent year Inta	angible	
24	[25]	29	30		Personal Property Tax.	·	ŬYes	□No
	9. Name and Address of Current				10. Name and Address of New	Registered /	Agent	
			81	Name				
	SEN, W. ANDREW JR.		82	Street A	Address (P.O. Box Number is Not Accept	able)		
	BAY TO BAY BLVD		"	Succes	adicos (1.0. Dox Hamber to Hot Hoope			
1	E 200		83	3				
TAM	PA FL 33629		84	4 Cib.		_	85 Zip (^ode
			02	1 City		FL	B3 Zip (20GC
								- , , , , , , , , , , , , , , , , , , ,
office or re agent. I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was aut ions of, Section 607.0505, Florid	thorized by da Statute	y the corpor	corporation submits this statement for the ration's board of directors. I hereby acce	рі іпе арроіг	changing its ntment as re	registered gistered
office or re agent. I ar SIGNATURE	egistered agent, or both, in the State of m familiar with, and accept the obligation Signature, typed or printed name of registered agent	of Florida. Such change was autions of, Section 607.0505, Floridations of title if applicable. (NOTE: F	thorized by da Statute Registered Age	y the corpor	ration's board of directors. I hereby acce	DATE	nument as re	gistered
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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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP