

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000000358

Entity Name: PRECISE SYSTEMS, INC.

Current Principal Place of Business:

22290 EXPLORATION DRIVE
SUITE 400
LEXINGTON PARK, MD 20653

Current Mailing Address:

22290 EXPLORATION DRIVE
SUITE 400
LEXINGTON PARK, MD 20653 US

FEI Number: 52-1686191

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHE, FL 33470 US

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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO, PRESIDENT
Name CURTIS, J. THOMAS
Address 22290 EXPLORATION DRIVE
SUITE 400
City-State-Zip: LEXINGTON PARK MD 20653

Title SECRETARY
Name PFISTER, SCOTT A.
Address 22290 EXPLORATION DRIVE
SUITE 400
City-State-Zip: LEXINGTON PARK MD 20653

Title VP
Name ROTHWELL, ANGELA
Address 22290 EXPLORATION DRIVE
SUITE 400
City-State-Zip: LEXINGTON PARK MD 20653

Title VP
Name MARINO, JOSEPH
Address 22290 EXPLORATION DRIVE
SUITE 400
City-State-Zip: LEXINGTON PARK MD 20653

Title VP
Name KIRKLAND, CHARLES
Address 22290 EXPLORATION DRIVE
SUITE 400
City-State-Zip: LEXINGTON PARK MD 20653

Title VP
Name WILLIAMS, PETER
Address 22290 EXPLORATION DRIVE
SUITE 400
City-State-Zip: LEXINGTON PARK MD 20653

Title DIRECTOR
Name BRAUN, RICHARD
Address 22290 EXPLORATION DRIVE
SUITE 400
City-State-Zip: LEXINGTON PARK MD 20653

I hereby 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 all other like empowered.

SIGNATURE: ANGELA ROTHWELL

VICE PRESIDENT

05/01/2018

Electronic Signature of Signing Officer/Director Detail

Date