## 2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

## **DOCUMENT # H92727**

1. Entity Name

Principal Place of Business

AIM-ALLOY WELDING, INC.

3939 SW 12 COURT FT. LAUDERDALE FL 33312			3939 SW 12 COURT FT. LAUDERDALE FL 33312-3452						uuu	<b></b>	٠.		
2. Principal Place of Business			3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.					DC	NOT W	RITE IN	THIS SF	PACE	
City & State			City & State			4. F	El Numbe	<sup>er</sup> 59	-26743	375			pplied For of Applicable
Zip		Country	Zip	Country		<b>5</b> . C	ertificate	of Status	s Desired	d [		8.75 Add	
		7. Name and Address of New Registered Agent Name											
1841	WDER, JAI S.W. 42N AUDERDA		Street A		treet Address (F	ddress (P.O. Box Number is Not Acceptable)							
11.1	AODENDA	LL 1 L 3001/		C	ity					<u> </u>	FL	Zip Cod	e
8. The above	named entit	y submits this statement fo	r the purpose of changing is	ts registered o	ffice or register	ed age	ent, or bol	th, in the	State of	Florida.			
SIGNATURE.	Signature, typed	or printed name of registered agent a	and title if applicable. (NC	OTE. Registered Age	nt signature required	when rei	instating)				DATE		<del></del>
<ol> <li>This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)</li> </ol>			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of S			te		ection Ca ust Fund		Financin ution.	g 🗆		May Be to Fees
11.		OFFICERS AND	1	<b>1</b> 2.			I DITIONS	CHANG	ES TO C	FFICER	S AND I	DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1841 S.V	ER, JACK L. V. 42ND AVE. DERDALE FL	☐ Delete	TITLE NAME STREET AD CITY-ST-2								☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CROWDI 1841 S.V	er, Jamie Sandra V. 42nd ave. Derdale fl	☐ Delete	TITLE NAME STREET AD CITY-ST-2					-			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AD CITY-ST-								☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Defete	TITLE NAME STREET AC CITY-ST-1			•					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AL CITY-ST-			<u></u>			-		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete	TITLE NAME STREET AL								Change	Addition
indicated of the co	on this report poration or t	ort or supplemental report is the receiver or trustee empo	n this filing does not qualify is true and accurate and that owered to execute this repo with all other like empowere	it my signature ort as required									

2/23/2000

**FILED** 

Mar 01, 2000 8:00 am Secretary of State

03-01-2000 90039 034 \*\*\*150.00