

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000019456

Entity Name: SUREWELD WELDING, INC.

FILED
Aug 21, 2005
Secretary of State

Current Principal Place of Business:

2161 LONGLEAF CIRCLE
LAKELAND, FL 33810

New Principal Place of Business:

3050 WEST SOCROM LOOP ROAD
LAKELAND, FL 33810

Current Mailing Address:

2161 LONGLEAF CIRCLE
LAKELAND, FL 33810

New Mailing Address:

3050 WEST SOCROM LOOP ROAD
LAKELAND, FL 33810

FEI Number: 59-3492602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARDENAS, RALPH
220 MADISON AVE
SUITE 825
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

COE, JAMES P
3050 WEST SOCROM LOOP ROAD
LAKELAND, FL 33810 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: JAMES P. COE

08/21/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: COE, MELISSA
Address: 2161 LONGLEAF CIRCLE
City-St-Zip: LAKELAND, FL 33810

Title: PCOO () Delete
Name: COE, PETE
Address: 2161 LONGLEAF CIRCLE
City-St-Zip: LAKELAND, FL 33810

Title: ST () Delete
Name: HINES, DEBORAH D
Address: 7503 N ARRAWANA
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: COE, MELISSA
Address: 3050 WEST SOCROM LOOP ROAD
City-St-Zip: LAKELAND, FL 33810

Title: PCOO (X) Change () Addition
Name: COE, PETE
Address: 3050 WEST SOCROM LOOP ROAD
City-St-Zip: LAKELAND, FL 33810

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: PETE COE

PCOO

08/21/2005

Electronic Signature of Signing Officer or Director

Date