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

PROFIT CORPORATION ANNUAL REPORT

100R



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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DOCL	JME	ENT	#				

324485

(2)

1. Corporation	WELDING AND ERECTION	` '			BLI DIGIJA SABAL DIBAL GLGAL 1881
Octobrill Disc					
	ce of Business	Maiting Address			
3390 US HW P.O.BOX 1580		PO BOX 1880 P.O.BOX 1580			
BARTOW FL		BARTOW FL 33831		DO NOT WRITE IN THE	S SPACE
US		t/s ×		3. Date Incorporated or Qualified	
a Principal C	Place of Business	2a. Mailing Address		12/27/1967 4. FEI Number	TA 25-18-
21	lace of business		17 1/2071	_ · ·	Applied For Not Applicable
Suite, Apl.	.#, etc.	Suite, Apt. #, etc.	17 NORTH	59-1270217	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28 BARTOW	FL	Trust Fund Contribution	Added to Fees
Zip	Country	7p 7p 7p 7p 7p 7p 7p 7p	Country	8. This corporation owes or has paid the o	_ ` _ `
24	25 g. Name and Address of Curre	28 33830	30 415A	Personal Property Tax due June 30. 10. Name and Address of New Registere	☐ Yes ☐ No
DΩ	DUSE,FRANK J.	on nogotoroo rigoni	81 Name	10. Traine and Address of Hotel Hegisters	a rigoni
	D EAST MAIN STREET		OO Choot Add	(D.C. Davidson in Alas Accounts)	
	RTOW FL 33830		82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
	111 017 7 E 00000		83	·	
			84 City	-	85 Zip Code
11, Pursuant	to the provisious of Sections 607.05	02 and 607 1508 Florida Statut	os the above-named corn	poration submits this statement for the purpose	
I office or a	registered agent, or both, in the Stat am familiar with, and accept the obli	le of Itorida. Such change was a	authorized by the corporat	ion's board of directors. Thereby accept the ap	opointment as registered
SIGNATURE		· · · · · · · · · · · · · · · · · · ·			
12.	Signature, typed or printed name of registered a OFFICERS A	gent and title it applicable (NOT ND DIRECTORS	I : Hagistered Agent signature requir	nd when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AT	AD DIDECTORS IN 13
TITLE	P	DELLIE	1.1 1/1/1	ADDITIONS/CHANGES TO OFFICERS AT	Change Addition
NAME	HOWELL, GEORGE W.		1.2 NAME		<u> </u>
STREET ADDRESS	1335 SPRING CT		1.3 STREET ADDRESS		
_ ÇITY - ST - ZIP	BARTOW FL		1.4 CITY-S1-ZIP		
TITLE	8	DELETE	2.1 TITEE		Change Addition
NAME	ROUSE, FRANK J.		2.2 NAME		
STREET ADDRESS	1985 EL PASO AVENUE		2.3 STREET ADDRESS		
CITY-ST-ZIP	BARTOW FL	T oriete	2 4 CRY-ST-ZIP	3	
TITLE	LANCH DEALS	L_] DELETE	3171111		Change Addition
NAME STREET ADDRESS	HOWELL, DEAN W. 1335 SPRING CT		3.2 NAME		
	BARTOW FL		3.3 STREET ADDRESS		
TITLE	DATIONIC	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME	•		4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 City - S1 - ZIP		
TITLE	- 1	DITE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CHY-ST-ZIP		

14. Thereby 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 armual report or supplemental armual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation of 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 an an attactive of with an address.

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FILED

Apr 21 1998 8:00am

Secretary of State