

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 434337

FILED
Jan 26, 2005
Secretary of State

Entity Name: RYDER WELDING SERVICE, INC.

Current Principal Place of Business:

350 ALI BALA AVE
P.O. BOX 796
OPA LOCKA, FL 33054

New Principal Place of Business:

350 ALI BABA AVE
P.O. BOX 540796
OPA LOCKA, FL 33054

Current Mailing Address:

350 ALI BALA AVE
P.O. BOX 796
OPA LOCKA, FL 33054

New Mailing Address:

350 ALI BABA AVE
P.O. BOX 540796
OPA LOCKA, FL 33054

FEI Number: 59-1487294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANDLER, ALAN
117 ARAGON AVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GAUS, CYNTHIA,
Address: 770 HARBOUR DRIVE
City-St-Zip: BOCA RATON, FL

Title: DP () Delete
Name: GAUS, JOEL,
Address: 770 HARBOUR DRIVE
City-St-Zip: BOCA RATON, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOEL GAUS

DP

01/26/2005

Electronic Signature of Signing Officer or Director

Date