

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2006 08:00 AM
Secretary of State

DOCUMENT # 462553

1. Entity Name
WELSCH'S INTERNATIONAL, INC.



Principal Place of Business
6312 N W 97 TH AVE
MIAMI, FL 33178

Mailing Address
6312 N W 97 TH AVE
MIAMI, FL 33178



01092006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1558784

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BURNS, RICHARD
1500 NW 104 SUITE 200
MIAMI, FL 33172

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME	PD WELSCH, PAUL E.
STREET ADDRESS	6312 N W 97 TH AVE
CITY-ST-ZIP	MIAMI, FL 33178
TITLE NAME	STD WELSCH, SHARON
STREET ADDRESS	6312 N W 97 TH AVE
CITY-ST-ZIP	MIAMI, FL 33178
TITLE NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1100000382922
01/12/06-80030-025 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL WELSCH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/9/06 305-597-2555

Date

Daytime Phone #