## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 650696** 

Entity Name: DORIA'S WELDING INC.

FILED Mar 31, 2009 Secretary of State

| Littly Na                                     | IIIE. DORIAG                    | VVELDING, INC.                 |  |   |
|---|---------------------------------|--------------------------------|--|---|
| Current Principal Place of Business:          |                                 |                                | New Principal Place of Business:             |   |
| 5735 WAS<br>NAPLES,                           | SHINGTON ST<br>FL 34109         | Js                             |  |   |
| Current Mailing Address:                      |                                 |                                | New Mailing Address:                         |   |
| 7795 DAV<br>STE 205<br>NAPLES,                |                                 |                                |  |   |
| FEI Number                                    | : 59-1961808                    | FEI Number Applied For ( )     | FEI Number Not Applicable ( )                | Certificate of Status Desired ( )       |
| Name and Address of Current Registered Agent: |                                 |                                | Name and Address of New Registered Agent:    |   |
| 888 GRAN<br>NAPLES,                           |                                 | SL                             |  |   |
|   | e named entity<br>e of Florida. | submits this statement for the | purpose of changing its registere            | ed office or registered agent, or both, |
| SIGNATU                                       | RE:                             |                                |  |   |
|   | Electro                         | nic Signature of Registered Ag | ent  | Date                                    |
| Election Ca                                   | mpaign Financir                 | g Trust Fund Contribution ( ). |  |   |
| OFFICERS AND DIRECTORS:                       |                                 |                                | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |   |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | DORIA, ALBEI                    | I GATE BLVD. W.                | Title:<br>Name:<br>Address:<br>City-St-Zip:  | () Change () Addition                   |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | DORIA, VERO                     | I GATE BLVD. W.                | Title:<br>Name:<br>Address:<br>City-St-Zip:  | ( ) Change ( ) Addition                 |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ALBERT DORIA PD 03/31/2009