

# **2005 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A03000000351

**FILED**  
**Mar 30, 2005**  
**Secretary of State**

**Entity Name:** ALL-STATE FABRICATORS LIMITED PARTNERSHIP

**Current Principal Place of Business:**

1316 TECH BOULEVARD  
TAMPA, FL 33619

**New Principal Place of Business:**

**Current Mailing Address:**

1316 TECH BOULEVARD  
TAMPA, FL 33619

**New Mailing Address:**

**FEI Number:** 56-2328650

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARVILL, ALAN D  
1316 TECH BOULEVARD  
TAMPA, FL 33619 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

**Capital Contributions as Shown on record:** 1,000,015.00

**Amount of Capital Contributions in Florida to date:** 1,000,015.00

**GENERAL PARTNER INFORMATION:**

**ADDRESS CHANGES ONLY:**

Document #: P03000024914  
Name: ALL-STATE FAB, INC.  
Address: 1316 TECH BOULEVARD  
City-St-Zip: TAMPA, FL 33619

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: ALAN D. HARVILL

MR.

03/30/2005

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date