


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 18, 2006 08:00 A
Secretary of State

DOCUMENT # F04000001996 1. Entity Name INTERNATIONAL WELDING & FABRICATION, INC.	
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Principal Place of Business 11401 HWY 63 MOSS POINT, MS 39562	Mailing Address 11401 HWY 63 MOSS POINT, MS 39562
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DO NOT WRITE IN THIS SPACE



05142006 No Chg-P CR2E034 (11/05)

4. FEI Number 64-0925597	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RAY, ELIZABETH PO BOX 193 HURLEY, MS 39555
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RAY, ROBERT KEITH PO BOX 193 HURLEY, MS 39555
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAY, BETH PO BOX 193 HURLEY, MS 39555
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RAY, KEITH PO BOX 193 HURLEY, MS 39555
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Elizabeth Ray 5/15/06 2284749354
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #