

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **1793000002507**

1. Corporation Name

Weld-on Adhesives, Inc.

Principal Place of Business

Mailing Address

**C/O IPS Corp
17109 S. Main St.
Gardena, Ca. 90248**

Same

3. Date Incorporated or Qualified

3a. Date of Last Report

5/28/93

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

Applied For
Not Applicable

95-4354983

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

Suite, Apt. #, etc

Suite, Apt. #, etc

City & State

City & State

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**Nations Corp Registered Agents
526 E. Park Ave.
Tallahassee, Fl. 32301**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of President, Director, Secretary or Treasurer

Signature of Registered Agent

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE

1.1 TITLE Change Addition

NAME **President/ Director**

1.2 NAME

STREET ADDRESS **Naresh Patel**

1.3 STREET ADDRESS

CITY-ST-ZIP **17109 S. Main St.
Gardena, Ca. 90248**

1.4 CITY-ST-ZIP

TITLE DELETE

2.1 TITLE Change Addition

NAME **Secretary**

2.2 NAME

STREET ADDRESS **Robert Cross**

2.3 STREET ADDRESS

CITY-ST-ZIP **17109 S. Main St.
Gardena, Ca. 90248**

2.4 CITY-ST-ZIP

TITLE DELETE

3.1 TITLE Change Addition

NAME **Chairman/ Director**

3.2 NAME

STREET ADDRESS **Wat Tyler**

3.3 STREET ADDRESS

CITY-ST-ZIP **17109 S. Main St.
Gardena, Ca. 90248**

3.4 CITY-ST-ZIP

TITLE DELETE

4.1 TITLE Change Addition

NAME **Director**

4.2 NAME

STREET ADDRESS **Jeff Humber**

4.3 STREET ADDRESS

CITY-ST-ZIP **17109 S. Main St.
Gardena, Ca. 90248**

4.4 CITY-ST-ZIP

TITLE DELETE

5.1 TITLE Change Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY-ST-ZIP

5.4 CITY-ST-ZIP

TITLE DELETE

6.1 TITLE Change Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY-ST-ZIP

6.4 CITY-ST-ZIP

70000185300 Change Addition
-06/06/96--01022--008
*****225.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Robert L. Cross

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE OF FILING

5/3/96 (310) 898-3306

CR2E034 (12/95)