FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G15402

(2)

FILED
May 06 1998 8:00am
Secretary of State

TONY I	PORTABLE WELDING, INC.	(2)			IRK BIRI BIRI BIRI BIRI BIRI KALI
Principal Place	e of Business	Mailing Address			IENI ALBIY BIRIY BIRIL BIRIL 1861
3498 NW 54TH ST 3498 NW 54TH ST MIAMI FL 33142 MIAMI FL 33142				DO NOT WRITE IN THI	S SDACE
US		US		3. Date Incorporated or Qualified	S SFACE
				12/28/1982	
2. Principal P	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		59-2244764	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt #, etc.			\$8.75 Additional
27			5. Certificate of Status Desired	Fee Required	
City & State Cily & State			6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	current year Intangible
24	25		0	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	nt Registered Agent	- N. A	10. Name and Address of New Registere	d Agent
PENA, SATURNINO 81 Name			critica Pona		
3498 NW 5TH ST			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	Lace
į MiA	AMI FL 33142		83	3 TI N.W. VI	
1			63		
			84 City	diami.	85 Zip Code
77. 5	027.02	007 st 00 the day 014 and		li FMI F	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 familiarly its physical provided by the corporation of the purpose of changing its registered agent. I am familiarly its physical provided by the corporation of the purpose of changing its registered agent. I am familiarly its physical provided by the corporation of the purpose of changing its registered agent. I am familiarly its physical provided by the corporation of the purpose of changing its registered agent. I am familiarly its physical provided by the corporation of the purpose of changing its registered agent. I am familiarly its physical provided by the corporation of the purpose of changing its registered agent. I am familiarly its physical provided by the corporation of the purpose of changing its registered agent. I am familiarly its physical provided by the corporation of the purpose of changing its registered agent. I am familiarly its physical provided by the corporation of the purpose of changing its registered agent. I am familiarly its physical provided by the corporation of the purpose of changing its registered agent. I am familiarly its physical provided by the physical provided by the physical provided					
	m familiar with find accord the oblig	firms of Section 607.0505, Flori	da Statutes.		
SIGNATURE	Signature, typy d or profind name of regulared age	int and title II applicable (NOTI :	Registered Agent signature require	24 Pent C	4-27-58
12.		D DIRECTORS	13.	. ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	PE NA, SATURNINO	•	1.2 NAME	16502 N.W. 82 P.	1/0 cm
STREET ADDRESS	1 65 42 NW 82 PLACE		1.3 STREET ADDRESS	MIGHTIGHT, 84	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	/ 112M/ 1/ 33	0/6
TITLE		☐ DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		•
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	2 4 CITY-ST-ZIP		
TITLE		∐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		<u> </u>
CITY-ST-ZIP		Devete	3.4. CITY-ST-ZIP		Takes
TITLE		☐ DELETE	4.1 TITLE		Change Addition [
NAME			4. 2 NAME		
STREET ADDRESS			43 STREET ADDRESS		\
CITY-ST-ZIP		☐ DELETE	4.4 CHY-ST-ZIP 5.1 TITLE		Change Addition
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NAME expect apprece	•		5.2 NAME		i
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		C Veces	62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP			6.4 CITY-ST-ZIP	•	Í
	ertify that the information supplied w	ith this filing does not qualify for		Section 119.07(3)(i), Florida Statutes. I further	certify that the information

6. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this annual report or supplicmental 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 trusten empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with a Address

SIGNATURE: P // Mb Hake TOUG

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OF-27-58 (305) CAS-7284