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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # **G82826**

1. Corporation Name

WEBSTE	RS MACHINE AND WELDIN	IG, INC.					
Principal Place of Business Mailing Address							1011 81811 1801
16098 BALLEY HILL RD 16098 BALLEY HILL RD BROOKSVILLE FL 34614 US US US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed		
					02/02/1984	<u> </u>	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number 59. 23590 NOT APPLICABLE		plied For t Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.					-	\$8.75 A	
22			•	~_	5. Certificate of Status Desired	Fee Re	
City & State City & State			- · ·		6. Election Campaign Financing	\$5.00	May Be
23 28					Trust Fund Contribution	Added to	
Zip				/	8. This corporation owes the current year In		}
24	25	29 3	0		Personal Property Tax.	Yes Yes	□No
	9. Name and Address of Curren	t Registered Agent	81	I	10. Name and Address of New Registered	Agent	
WER	STER, GLENN		81	Name	the state of the s		
16098 BAILEY HILL RD			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		,
BROOKSVILLE FL 34614			83				
DISONOVILLE I E 01011			0.3	'}	· •••		
			84	City		85 Zip 0	Code
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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
12,	OFFICERS AN	***	13.	nit signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PD	DELETE	1,1 TITLE			☐ Change	Addition
NAME			1.2 NAME				
STREET ADDRESS				TADDRESS	;		
CITY-ST-ZiP	mana di salam sa ma		1,4 CITY-1	Į.	<i>;</i> ;		
TITLE			2.1 TITLE			☐ Change	☐ Addition
NAME			2.2 NAME				
STREET ADORESS			2.3 STREET ADDRESS				
CITY-ST-ZIP	550 0 (A) (B) (F 5)		2. 4 CITY-	ST-ZIP			
TITLE			3.1 TITLE			☐ Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS	3		3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		☐ DELETE 4.1				Change	Addition
NAME			4. 2 NAME		<u>, , , , , , , , , , , , , , , , , , , </u>		
STREET ADDRESS	DDRESS 4.3		4.3 STREE	T ADDRESS	,		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE			5.1 TITLE		V*	Change	☐ Addition
NAME			5.2 NAME		, , , , , , , , , , , , , , , , , , ,		İ
STREET ADDRESS			1	TADORESS			ļ
CITY-ST-ZIP			5.4 CITY-1	ST-ZIP			

14. 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 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 chapted, or on an attachment with an address, with all other like empowered.

6.1 TITLE

62 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME:

STREET ADDRESS

CITY-ST-ZIP

DELETE

☐ Change

Addition