

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 # **H52722**

(6)

1. Corporation Name
FRISCO WELDING, INC.



Principal Place of Business

Mailing Address

**C/O FRANCISCO GABOR
718 N.W. 8TH AVENUE
FT LAUDERDALE FL 33311**

**C/O FRANCISCO GABOR
718 N.W. 8TH AVENUE
FT LAUDERDALE FL 33311**

2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

3. Date Incorporated or Qualified 04/17/1985	3a. Date of Last Report 01/27/1995
4. FEI Number 59-2527788	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GABOR, FRANCISCO
718 N.W. 8TH AVENUE
FT LAUDERDALE FL 33311**

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 607.0402 and 607.1504, 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 _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GABOR, FRANCISCO	2. NAME	
STREET ADDRESS	718 N.W. 8TH AVE.	3. STREET ADDRESS	
CITY-STATE-ZIP	FT LAUDERDALE FL	4. CITY-STATE-ZIP	
TITLE	VPD	2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GABOR, GLORIA	2.2 NAME	
STREET ADDRESS	718 N.W. 8TH AVE.	2.3 STREET ADDRESS	
CITY-STATE-ZIP	FT LAUDERDALE FL	2.4 CITY-STATE-ZIP	
TITLE	SECRETARY.	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JORGE A. GABOR.	3.2 NAME	
STREET ADDRESS	718 N.W. 8TH AVE.	3.3 STREET ADDRESS	
CITY-STATE-ZIP	FT LAUDERDALE FLA	3.4 CITY-STATE-ZIP	
TITLE	TREASURER.	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODOLFO GABOR.	4.2 NAME	
STREET ADDRESS	718 N.W. 8TH AVE.	4.3 STREET ADDRESS	
CITY-STATE-ZIP	FT LAUDERDALE FLA.	4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

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, 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 amendment with an address.

SIGNATURE: *Griseola Gabor* **GRISELOA G GABOR** 4-15-96 522-6097
SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day or Month

CR2E034 (12/95)