

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

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
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 Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
**04/17/1985**

3a. Date of Last Report  
**01/27/1995**

4. FLE Number  
**59-2527788**

Applied For Not Applicable

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

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

Signature of person who is to be registered as agent

Signature of person who is to be registered as agent

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE: **PD**  DELETE  
NAME: **GABOR, FRANCISCO**  
STREET ADDRESS: **718 N.W. 8TH AVE.**  
CITY-STATE-ZIP: **FT LAUDERDALE FL**

11 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-STATE-ZIP

TITLE: **VPD**  DELETE  
NAME: **GABOR, GLORIA**  
STREET ADDRESS: **718 N.W. 8TH AVE.**  
CITY-STATE-ZIP: **FT LAUDERDALE FL**

21 TITLE  Change  Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY-STATE-ZIP

TITLE: **SECRETARY.**  DELETE  
NAME: **JORGE A. GABOR.**  
STREET ADDRESS: **718 N.W. 8TH AVE.**  
CITY-STATE-ZIP: **FT LAUDERDALE FLA**

31 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-STATE-ZIP

TITLE: **TREASURER.**  DELETE  
NAME: **RODOLFO GABOR.**  
STREET ADDRESS: **718 N.W. 8TH AVE.**  
CITY-STATE-ZIP: **FT LAUDERDALE FLA.**

41 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-STATE-ZIP

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-STATE-ZIP

TITLE:  DELETE  
NAME:  
STREET ADDRESS:  
CITY-STATE-ZIP:

61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 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*  
SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**GRISELOA GABOR**

**4-15-96**

**522-6097**

CR2E034 (12/95)