## 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 # 1. Corporation Name

(6)

CENTRAL WELDING & FABRICATING, INC.

**FILED** 

Mar 03 1998 8:00am

Secretary of State

				<u> </u>	## BABAR BABAR BABAR BABAR
Principal Plac	e of Business	Mailing Address			
161 WEST CEDARWOOD CIRCLE 161 WEST CEDARWOOD CIRCLE			CIRCLE		
3802 Bryn Mawr St. Kissnamee Fl 34743		KISSIMMEE FL 34743 US		DO NOT WRITE IN THIS SPACE	
US		••		3. Date incorporated or Qualified	
				03/16/1989	
	lace of Business	2a. Mailing Address	- >>	4. FEI Number	Applied For
	KE PLEA SANT RD. N.	26 7/2 LAKEP =A	SAN KD. N.	59-2925240	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 APOP	KA FL.	28 APOPKA FL		Trust Fund Contribution	Added to Fees
Zip 24 327	Country U.S.A.	Zip 29 32 7/2 3	Country Country	8. This corporation owes or has paid the cu	ırr <b>ş</b> nt year Intangible ☑ Yes ☐ No
24 52 7	9. Name and Address of Current		10) <b>(</b> , >,/+,	Personal Property Tax due June 30.  10, Name and Address of New Registered	
CO	DLLINS, RICKY D		B1 Name		
101 M CENTROOP OR				ICKY D. COLLENS	
KISSIMMEE FL 32743			82 Street Add	dress (P.O. Box Number is Not Acceptable)  AKE PIEASANT RD. ^	١,
Tuc	MARILL I L OLI TO		B3	ACE ILEASAN I AV.	.•
			B4 City A POS	PKA FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above-named cor	rporation submits this statement for the purpose of	of changing its registered
office or r	registered agent, or both, in the State o Im familiar with, and accept the obligati	f Florida. Such change <b>wa</b> s au ons of. Section 607.0505, Flori	thorized by the corpora	ation's board of directors. I hereby accept the ap-	pointment as registered
	Rock D. Collins P		de lill		3-98
OIGHATOTIE	Signature typed or printed name of registered agent	and title if applicable (NOTE: I	Registered Ageni signature requ		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D D	☐ DELETE	1.1 TITLE	make a N 12 fee	
NAME	COLLINS, RICKY DALE 161 W. CEDARWOOD CIR.		1.2 NAME	TO LAKE SICA SANT RD. N	
STREET ADDRESS					11
			1.3 STREET ADDRESS	0-014 E1 30-713	18
CITY-ST-ZIP	KISSIMMEE FL	□ DELETE	1.4 CITY - ST - ZIP	ICK COLLINS 12 14KE PLEAFANT RD. N POPKA FL. 32712	Change Addition
TITLE		☐ DELETE	2.1 TITLE	POPKA FL. 327/2	Change Addition
TITLE NAME		☐ DELETE	2.1 TITLE 2.2 NAME	POPKA FL. 327/2	Change Addition
TITLE NAME STREET ADDRESS		☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	POPKA FL. 327/2	Change Addition
TITLE NAME		☐ DELETE	2.1 TITLE 2.2 NAME	POPKA FL. 32712	Change Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	POPKA FL. 32712	Change L. Addition
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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 changed, or on an attachment with an address.