2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 18, 2005 08:00 AM Secretary of State

1. Entity Nan	MENT # K79983 A GAS & WELDING SUPPLIES	, INC.		Se	cretary of State
2215 SW 58	BTH AVE —	Mailing Address 2215 SW 58TH AVE HOLLYWOOD, FL 33023		 	I F JUL BYNN BYNN AUN BYNN BYNN BYNN BYNN BYNN BYNN BYNN BY
	OO NOT WRITE I		CE	01262005 No Chg-P 4. FEI Number 65-0120551 5. Certificate of Status Desire	CR2E034 (10/03) Applied For Not Applicable S8.75 Additional Fee Required
HOLLYWO	6. Name and Address of Current Regill, OTTO 58TH AVE DOD, FL 33023 e named entity submits this statement for the tions of registered agent.		ed office or register	DO NOT V IN THIS S ed agent, or both, in the State of	PACE
SIGNATURE.	Signature, typed or printed name of registered agent and title	e if applicable (NOTE Registered	d Agent signature required	when reinstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.		00 May Be ed to Fees	
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST BURRION, OTTO 5841 LEE-ST HOLLYWOOD, FL	· · · · · · · · · · · · · · · · · · ·		U000 02/18/0	00235382 5-80058-015 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT V	WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS S	PACE
TITLE NAME]		

12. I hereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information Indicated on this report or supplemental 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 outrustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

THAT THE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

SIGNATURE;

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Date

Daytime Phone #