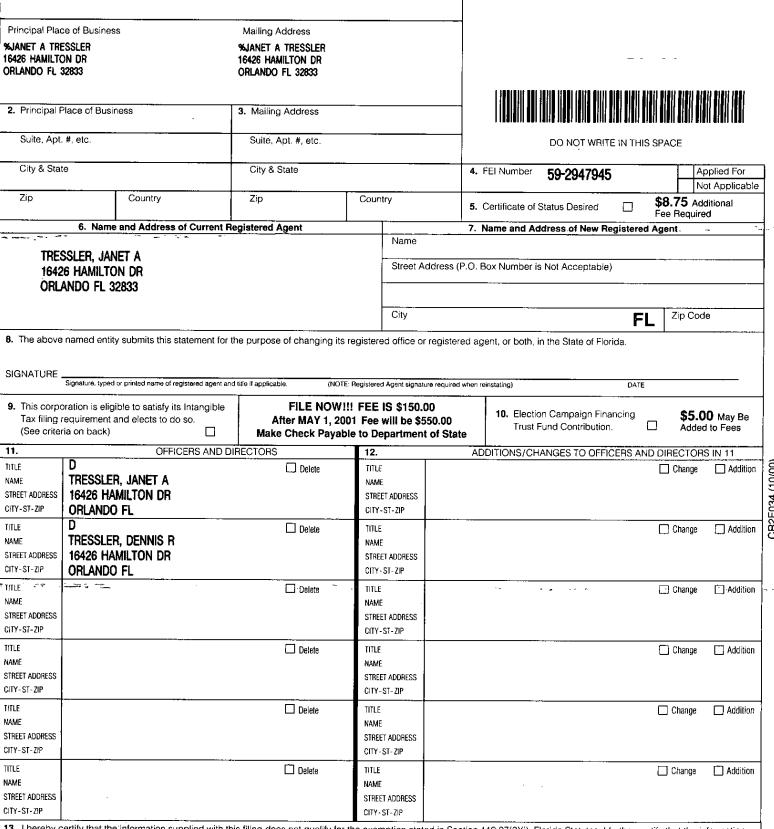
## **2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # K82864** T & T WELDING, INC. Principal Place of Business Mailing Address %JANET A TRESSLER %JANET A TRESSLER 16426 HAMILTON DR 16426 HAMILTON DR ORLANDO FL 32833 ORLANDO FL 32833 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number 59-2947945 Zip Country Zip Country 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Name TRESSLER, JANET A Street Address (P.O. Box Number is Not Acceptable) 16426 HAMILTON DR ORLANDO FL 32833 City FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. TITLE ☐ Delete TITLE TRESSLER, JANET A NAME 16426 HAMILTON DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP TITLE Delete TITLE TRESSLER, DENNIS R NAME NAME STREET ADDRESS 16426 HAMILTON DR STREET ADDRESS CITY-ST-ZIP

## **FILED** Feb 03, 2001 8:00 am Secretary of State

02-03-2001 90078 015 \*\*\*150.00



13. 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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attach ent with an address, with all other like empowered.

SIGNATURE:

TITLE

NAME

TITLE

NAME

TITLE

NAME