## 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 #

(4)

ALL AROUND WELDING, INC.

**FILED** Apr 06 1998 8:00am Secretary of State



| Principal Place of Business  | Mailing Address                        |                                   |  | 5154 6154 6164 6164 6164 6164 1664 |
|--|--|-----------------------------------|--|------------------------------------|
| 2601 N.W 55TH COURT  | 2601 N.W 55TH COURT                    |                                   |  |                                    |
| FT LAUDERDALE FL 33309   | FT LAUDERDALE FL 33305                 | 9                                 | DO NOT WRITE IN THIS SPACE                       |                                    |
|  |  |                                   | 3. Date Incorporated or Qualified                | 10 01 7101                         |
|  |  |                                   | 08/02/1985                                       |                                    |
| 2. Principal Place of Business   | 2a. Mailing Address                    |                                   | 4. FE! Number                                    | Applied For                        |
| 21   | 26                                     |                                   | 59-2561542                                       | Not Applicable                     |
| Suite, Apt. #, etc.  | Suite, Apt. #, etc.                    |                                   |  | \$8.75 Additional                  |
| 22   | 27                                     |                                   | 5. Certificate of Status Desired                 | Fee Required                       |
| City & State   | City & State                           |                                   | 6. Election Campaign Financing                   | \$5.00 May Be                      |
| 23   | 28                                     |                                   | Trust Fund Contribution                          | Added to Fees                      |
| Zip Country  | Zip                                    | Country                           | 8. This corporation owes or has paid the         | ′ ′                                |
| 24 25  |  | 30                                | Personal Property Tax due June 30.               | Yes No                             |
| 9. Name and Address of Curr  | ent Hegistered Agent                   | 81 Name                           | 10. Name and Address of New Register             | ed Agent                           |
| BEAMER, WILLIAM D.   |  | I Name                            |  |                                    |
| 310 S.E. 13 ST.  |  | 82 Street Addr                    | ress (P.O. Box Number is Not Acceptable)         |                                    |
| FT. LAUDERDALE FL 33316  |  | 63                                |  |                                    |
|  |  | 63                                |  |                                    |
|  |  | <b>84</b> City                    | •  | 85 Zip Code                        |
| 10.00  | F00                                    |                                   | <del>_</del>                                     | EL S ZID Code                      |
| <ol> <li>Pursuant to the provisions of Sections 607.0<br/>office or registered agent, or both, in the Sta</li> </ol> | ate of Florida. Such change was au     | uthorized by the corporat         | tion's board of directors. I hereby accept the   | appointment as registered          |
| agent. I am familiar with, and accept the obt  | igations of, Section 607.0505, Flor    | rida Statutes.                    |  |                                    |
| SIGNATURE Signature, typed or printed name of registered in  | mont and title if made and             | Registered Agent signature requir | red when reinstaling) DA1                        | t                                  |
|  | AND DIRECTORS                          | 13,                               | ADDITIONS/CHANGES TO OFFICERS                    |                                    |
| TITLE PD   | DELETE                                 | 11 THTLE                          |  | ☐ Change ☐ Addition                |
| NAME CROW, BRADLEY DALE  |  | 12 NAME                           |  | İ                                  |
| STREET ADDRESS 918 NAUTILUS ISLE   |  | 1.3 STREET ADDRESS                |  |                                    |
| CITY-ST-ZIP DANIA FL   |  | 1.4 C(TY - ST - Z)P               |  | İ                                  |
| TITLE  | DELETÉ                                 | 21 TITLE                          |  | Change Addition                    |
| NAME   |  | 2.2 NAME                          |  |                                    |
| STREET ADDRESS   |  | 2.3 STREET ADDRESS                |  |                                    |
| CITY-ST-ZIP  |  | 2. 4 CITY - ST - ZIP              |  |                                    |
| TITLE  | DELETE                                 | 3 1 TITLE                         |  | Change Addition                    |
| NAME   |  | 3.2 NAME                          |  |                                    |
| STREET ADDRESS   |  | 3.3 STREFT ADDRESS                |  | +                                  |
| C/TY-ST-ZIP  |  | 3.4. CITY-ST-ZIP                  |  |                                    |
| TOLE   | ☐ DELETE                               | 4.1 TITLE                         |  | Change Addition                    |
| NAME   |  | 4. 2 NAME                         |  |                                    |
| STREET ADDRESS   |  | 4.3 STREET ADDRESS                |  |                                    |
| CITY-ST-ZIP  |  | 4.4 CITY - ST - ZIP               |  |                                    |
| TITLE  | ☐ DELETE                               | 5.1 THILE                         |  | Change Addition                    |
| NAME   |  | 5.2 NAME                          |  |                                    |
| STREET ADDRESS   |  | 5.3 STREET ADDRESS                |  |                                    |
| CITY-ST-ZIP  |  | 5.4 CITY - S1 - ZIP               |  |                                    |
| TITLE  | DELETE                                 | 6.1 TITLE                         |  | Change Addition                    |
| NAME   | 1                                      | 6.2 NAME                          |  |                                    |
| STREET ADDRESS   | _                                      | 6.3 STREET ADDRESS                |  |                                    |
| CITY-ST-ZIP  |  | 6.4 CITY-ST-ZIP                   |  |                                    |
| 14. I hereby certify that the information applied  | with this litting does not qualify for |                                   | Section 119.07(3)(i), Florida Statutes. I furthe | r certify that the information     |

Opplemental annual eport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in on an attachment with an address. officer or director of the corpore Block 12 or Block 13 if charged

2/2/108