2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Mailing Address

MIAMI FL 33155

4625 S.W. 74TH AVENUE

DOCUMENT # M48710

1. Entity Name

MIAMI FL 33155

Principal Place of Business

4625 S.W. 74TH AVENUE

ABEL WELDING & IRON WORKS CORP.



FILED Feb 17, 2003 8:00 am Secretary of State

02-17-2003 90269 010 ***150.00

Innressa



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2. Principal Pla	ace of Busin	ess	3. Mailing Address									
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State			City 8	City & State				4. FEI Number 59-2785825			plied For	
Only & State											t Applicable	
Zip		Country	Zip	Zip		Country		5. Certificate of Status Desired L. Fee		ee Require		
6. Name and Address of Current Registered Agent						- 7	.7N	lame and Address of New Reg	istered A	gent		
						Name						
RODRIGUE	KA			Stroot Address	ox Number is Not Acceptable)							
4625 S.W.	JE			Sirect / idarest								
MIAMI FL												
						City			FL	Zip Cod	e	
	1	hada this statement	for the pure	nee of changing its r	egister	ed office or regist	tered age	ent, or both, in the State of Flori	da. I am f	amiliar with,	and accept	
The above the obligation	named entitions of regis	ly submits this statement tered agent.	tor the purpo	us of criainging its i	egister	ca omee or regio	.0.00.09					
are obligate	.5.15 01 10910										j	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re						d Agent signature requi	ired when re	instating)	DATE			
	Signature, typed	or printed name of registered age	ent and one ii appi	Cable. (11012	.,							
		!! FEE IS \$150.00	_					9. Election Campaign Fina			May Be	
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Trust Fund Contribution.] Added	d to Fees	
Make Check	Payable to	*			11.		ΔΓ	L DDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 11	
10.	DD.	OFFICERS AN	ND DIRECTO		TITL		710	ADITIONO, OTHER DESIGNATION OF THE PERSON OF		Change	Addition	
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CITY-ST-ZIP						Y-ST-ZIP					information	
12 Lhoroby	cortify that t	he information supplied t	with this filing	does not qualify for	r the ex	emption stated in	n Section	119.07(3)(i), Florida Statutes. I	iurtner ce	ruiy iriat ine	mormation	

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

02-13-03 (389) 266-6555 Date Daylime Phone #