## 2005 NOT-FOR-PROFIT CORPORATION

## ANNUAL REPORT

## DOCUMENT # N44256

1. Entity Name PAN AMERICAN COALITION OF WELDING INSTITUTIONS (PACWI), INC.



**FILED** 

May 13, 2005 8:00 am Secretary of State

50052431

05-13-2005 90227 020 \*\*\*\*61.25

Principal Place of Business 550 N. W. LEJEUNE RD MIAMI, FL 33126

2. Principal Place of Business

Mailing Address 550 N.W. LEJEUNE RD MIAMI, FL 33126

3. Mailing Address

	1							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		05102005 Ch	g-NP	CR2E037	7 (10/03)	
City & State		City & State		4. FEI Number Applied For			pplied For	
				65-035729	4		$\square$ $\square$ N	ot Applicable
Zip	Country	Zip .	Country	5. Certificate of Sta	itus Desired		8.75 Ad ee Require	
6. Name and Address of Current Registered Agent				7. Name and Add	ess of New	Registered A	gent	
			Name					
HUFSEY, JEFFREY 550 N.W. LEJEUNE ROAD			Street Address (P.O. Box Number is Not Acceptable)					
			Street F	Street Address (P.O. Box Number is Not Acceptable)				
MIAMI, FL	. 33126		<b></b>				·	
í							<del></del>	
			City			FL	Zip Coo	ie
8. The above	e named entity submits this statement for the pu	rpose of changing its r	eaistered office o	registered agent, or both, in	he State of F	lorida. Lam fa	amiliar with	and accept
	tions of registered agent.		-9,0	. 109.010.22.22.1				, 0.12
SIGNATURE								
			Registered Agent signa	signature required when reinstating) DATE				
The state of the s			Financing	The state of the s				
Filing Fee is \$61.25 Due by September 7, 2005		S. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees Make check payable to Florida Department of State				
	<del></del>							
10.	0. OFFICERS AND DIRECTORS 11			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10				
TITLE	PD	☐ Delete	TITLE				☐ Change	Addition
NAME	DAVIS, CIPRIANI		NAME					
STREET ADDRESS	CENTURY DRIVE		STREET ADDRESS					
CITY-ST-ZIP	TRINCITY, TRINIDAD,		CITY-ST-ZIP					
TITLE	VPD	☐ Delete	TITLE				☐ Change	☐ Addition
NAME	PANEZIC, SLAVKO		NAME					_
STREET ADDRESS	7250 W CREDIT AVE		STREET ADDRESS					
CITY-ST-ZIP	MISSISSAUGA, ONT L5N 5N1CANA,		CITY+ST-ZIP					
TITLE	VPD	Xi≥lete	TITLE	ST.			☐ Change	Addition
NAME	QUINITINI, CARLOS	Manage Control	=	I	מישו			
STREET ADDRESS	APARTADO 52042		STREET ADDRESS	HERRERA, WALT		. =		
OTTALL ADDICES	CARACAS 1050-A VENEZHELA		CITY-ST-7IP	550 N.W. LeJe	eune R	₹d.		

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 or trustee empowered to execute this report as required by Chapter 617, 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.

TITLE

NAME STREET ADDRESS

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

VPD

VPD

PARTETO, CLAUDIO

550 NW LEJEUNE RD.

MIAMI, FL 33126

CHIN, HOWARD

2 WINCHESTER RD

KINGSTON 6, JAMAMICA,

SHOOK, RAY

RUA ANTONIO CAMPARATO, 218

04605-030, SAO PAULO, BRAZIL,

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

JEFFREY R. HUFSEY SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

Delete

Delete

5/10/05 Date

305 44 3 9353

Daytime Phone #

Change

☐ Change

☐ Change

■ Addition

☐ Addition

Addition