

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90121 017 ***150.00

DOCUMENT # P00000013274

1. Entity Name
INTERNATIONAL MACHINE & WELDING, INC.



Principal Place of Business
1400 CHAMBER DRIVE
BARTOW FL 33830

Mailing Address
P.O. BOX 269
BARTOW FL 33831

11060004



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3655662**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HEFNER, DANIEL L
1502 N. TAYLOR ROAD
BRANDON FL 33510

Name **H. Frank Briggs, Sr.**
Street Address (P.O. Box Number is Not Acceptable)
2432 Roslyn Lane
City **Lakeland** **FL** **Zip Code** **33813**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *H. Frank Briggs, Sr.*
H. FRANK BRIGGS SR.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/28/03

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **HEFNER, DANIEL**
STREET ADDRESS **1502 N. TAYLOR ROAD**
CITY-ST-ZIP **BRANDON FL 33510**

TITLE **D** ☒ Change ☐ Addition
NAME **Hefner, Daniel**
STREET ADDRESS **1502 N. Taylor Road**
CITY-ST-ZIP **Brandon, FL 33510**

TITLE **SD** ☐ Delete
NAME **LEWIS, CYNTHIA A**
STREET ADDRESS **485 E. STANFORD ST.**
CITY-ST-ZIP **BARTOW FL 33830**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **P/D** ☐ Change ☒ Addition
NAME **Michael A. Crandall**
STREET ADDRESS **3920 Tiger Creek Trail**
CITY-ST-ZIP **Lake Wales, FL 33853**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V/D** ☐ Change ☒ Addition
NAME **H. Frank Briggs, Sr.**
STREET ADDRESS **2432 Roslyn Lane**
CITY-ST-ZIP **Lakeland, FL 33813**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **Fred D. Harrison**
STREET ADDRESS **830 N. Lanier Avenue**
CITY-ST-ZIP **Fort Meade, FL 33841**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/03 (863) 533-0326

Date

Daytime Phone #

CR2E034 (10/02)