



FILED
Apr 29, 2005 08:00 AM
Secretary of State

<div style="display: flex; justify-content: space-between;"><div>DOCUMENT # P00000023126 1. Entity Name D & D WELDING & FABRICATING, INC.</div><div style="text-align: center;"></div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>Principal Place of Business 210 SW 29TH TERR. FT. LAUDERDALE, FL 33312</div><div>Mailing Address 210 SW 29TH TERR. FT. LAUDERDALE, FL 33312</div></div>		<div style="text-align: right;">Secretary of State</div> <div style="text-align: center; margin-top: 20px;"></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;">04142005No Chg-PCR2E034 (10/03)</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>4. FEI Number 65-0985613</div><div>Applied For <input type="checkbox"/> Not Applicable</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>5. Certificate of Status Desired <input type="checkbox"/></div><div>\$8.75 Additional Fee Required</div></div>																																																											
DO NOT WRITE IN THIS SPACE																																																													
6. Name and Address of Current Registered Agent																																																													
BUCK, DERRIS 210 SW 29TH TERR. FT. LAUDERDALE, FL 33312	DO NOT WRITE IN THIS SPACE																																																												
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.																																																													
<div style="display: flex; justify-content: space-between;"><div>SIGNATURE _____</div><div>(NOTE: Registered Agent signature required when reinstating)</div><div>DATE _____</div></div>																																																													
<div style="display: flex; justify-content: space-between;"><div style="width: 30%; text-align: center;">FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</div><div style="width: 30%; padding: 5px;">9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees</div><div style="width: 30%;"></div></div>																																																													
10. OFFICERS AND DIRECTORS																																																													
<table border="1" style="width:100%; border-collapse: collapse;"><tr><td style="width:10%;">TITLE</td><td style="width:10%;">D</td><td style="width:80%;">NAME</td></tr><tr><td>NAME</td><td></td><td>BUCK, DERRIS</td></tr><tr><td>STREET ADDRESS</td><td></td><td>210 SW 29TH TERR.</td></tr><tr><td>CITY-ST-ZIP</td><td></td><td>FT. LAUDERDALE, FL 33312</td></tr><tr><td>TITLE</td><td>D</td><td>NAME</td></tr><tr><td>NAME</td><td></td><td>BUCK, DAPHNEY</td></tr><tr><td>STREET ADDRESS</td><td></td><td>210 SW 29TH TERR.</td></tr><tr><td>CITY-ST-ZIP</td><td></td><td>FT. LAUDERDALE, FL 33312</td></tr><tr><td>TITLE</td><td>D</td><td>NAME</td></tr><tr><td>NAME</td><td></td><td>BUCK, DERRIS JR.</td></tr><tr><td>STREET ADDRESS</td><td></td><td>210 SW 29TH TERR.</td></tr><tr><td>CITY-ST-ZIP</td><td></td><td>FT. LAUDERDALE, FL 33312</td></tr><tr><td>TITLE</td><td></td><td>NAME</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr><tr><td>TITLE</td><td></td><td>NAME</td></tr><tr><td>NAME</td><td></td><td></td></tr><tr><td>STREET ADDRESS</td><td></td><td></td></tr><tr><td>CITY-ST-ZIP</td><td></td><td></td></tr></table>	TITLE	D	NAME	NAME		BUCK, DERRIS	STREET ADDRESS		210 SW 29TH TERR.	CITY-ST-ZIP		FT. LAUDERDALE, FL 33312	TITLE	D	NAME	NAME		BUCK, DAPHNEY	STREET ADDRESS		210 SW 29TH TERR.	CITY-ST-ZIP		FT. LAUDERDALE, FL 33312	TITLE	D	NAME	NAME		BUCK, DERRIS JR.	STREET ADDRESS		210 SW 29TH TERR.	CITY-ST-ZIP		FT. LAUDERDALE, FL 33312	TITLE		NAME	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		NAME	NAME			STREET ADDRESS			CITY-ST-ZIP			<div style="text-align: right; margin-bottom: 20px;">UD0000341765 04/29/05 80028-025 158.75</div> <div style="text-align: center; height: 100px; vertical-align: middle;">DO NOT WRITE IN THIS SPACE</div>
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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.																																																													
<div style="display: flex; justify-content: space-between;"><div>SIGNATURE: <u>D BUCK</u> <u>DAPHNEY BUCK</u></div><div>4-15-05 954 316-8668</div></div> <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;"><div>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</div><div>Date</div><div>Daytime Phone #</div></div>																																																													