## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT #**

Principal Place of Business

P01000050056

Mailing Address

UNIT 7B

1100 25TH STREET

1. Entity Name

1100 25TH STREET

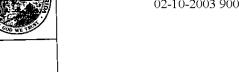
UNIT 7B

VALENCIA WELDING, INC.



**FILED** Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90075 001 \*\*\*\*\*8.75 02-10-2003 90075 002 \*\*\*150.00





WEST PALM BEACH FL 33407  2. Principal Place of Business		WEST PALM BEACH FL 33407  3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. F	65-1101609	65-1101609   Not Applicable			
Zip	Country	Zip	Countr	ry		Certificate of Status Desired	WAU F∈	<b>8.75</b> Addit ee Required		
	6. Name and Address of Current	Registered Agent			7.÷N	lame and Address of New	Registered Ag	ent		
VALENCIA, FERNEY 4815 VILLA PALM LAKES #1411				Name VALENCIA, TERNEY Street Address (P.O. Box Number is Not Acceptable) 316 33 Street						
	A BEACH FL 33417			City	Palm	Beach	FL	Zip Code	07	
the obligation	named entity submits this statement for ons of registered agent. Signature, typed or printed name of registered agent		ng its registere	ed office or re	egistered ag	ent, or both, in the State of F	DATE			
Δfter	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	of State			<u> </u>	9. Election Campaign for Trust Fund Contribut	ion. $\square$	Added	May Be to Fees	
10.	OFFICERS AND		11.			DDITIONS/CHANGES TO O		Change	Addition	
TITLE NAME	PD VALENCIA, FERNEY 4815 VILLA PALM LAKES, #141 WEST PALM BEACH FL 33417	<b>凌</b> Delete	NAM STRI		PD Valence 316 rd West P	ia, Ferney 1 33 Street blm Beach, FL			Addition	
TITLE NAME STREET ADDRESS	West frames and	☐ Delete	NAN STR		•		· ·	Change	-	
TITLE NAME STREET ADDRESS	سوريت مبر در روي ري ر	Delete	NAM STR		مين يعد ديد			Change	Addition	
TITLE NAME STREET ADDRESS	to the state of th	☐ Delete	NAI Stf					☐ Change	Addition	
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS		☐ Delete	NA STI	LE ME: REET ADDRESS IY-ST-ZIP				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delet	re Till NA St	ILE IME REET ADDRESS TY-ST-ZIP		n 119.07(3)(i), Florida Statul	es I further ce	☐ Change	☐ Addition	

12. I hereby certify that the information applied 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 supplier ental 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 time empowered.

SIGNATURE:

02/03/03

(561) 687-9095