

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000090538

FILED
Apr 13, 2009
Secretary of State

Entity Name: CENTRAL FLORIDA WELDING SERVICES INC.

Current Principal Place of Business:

417 SPRING HAMMOCK CT.
LONGWOOD, FL 32750

New Principal Place of Business:

Current Mailing Address:

417 SPRING HAMMOCK CT.
LONGWOOD, FL 32750

New Mailing Address:

FEI Number: 01-0741719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DURAPAU, LINDA O SECTARY
1424 GALENA TERRACE
DELTONA, FL 32725 US

Name and Address of New Registered Agent:

DURAPAU, LINDA O SECRTRY
1424 GALENA TERRACE
DELTONA, FL 32725 US

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.

SIGNATURE: LINDA O. DURAPAU

04/13/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: DURAPAU, ROBERT O VICE PR
Address: 1424 GALENA TERRACE
City-St-Zip: DELTONA, FL 32725

Title: SECR () Delete
Name: DURAPAU, LINDA O SECR
Address: 1424 GALENA TERRACE
City-St-Zip: DELTONA, FL 32725

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TRES () Change (X) Addition
Name: DURAPAU, ROBERT O DURAPAU
Address: 1424 GALENA TERRACE
City-St-Zip: DELTONA, FL 32725

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT O. DURAPAU

V.P.

04/13/2009

Electronic Signature of Signing Officer or Director

Date