

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 17, 2004 8:00 am
Secretary of State

05-17-2004 90019 043 ***150.00

24076308



03062003 Chg-P CR2E034 (10/03)

DOCUMENT # P03000003135					
1. Entity Name HORSE STEEL ORNAMENTAL GENERAL WELDING, INC.					
Principal Place of Business 2277 NW 21ST TERRACE MIAMI, FL 33142			Mailing Address 2277 NW 21ST TERRACE MIAMI, FL 33142		
2. Principal Place of Business <i>9259 NW 121st Street</i>		3. Mailing Address <i>9259 NW 121st Street</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <i>Hialeah Gardens, FL</i>		City & State <i>Hialeah Gardens, FL</i>		4. FEI Number <i>16-1648406</i>	
Zip <i>33018</i>		Country		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent MORALES, JUAN I 2277 NW 21ST TERRACE MIAMI, FL 33142			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$550.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORALES, JUAN I 2277 NW 21ST TERRACE MIAMI, FL 33142		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MORALES, FRANKLYN A 2277 NW 21ST TERRACE MIAMI, FL 33142		<input type="checkbox"/> Delete		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <i>5-14-04</i> 3056334103 <small>(Daytime Phone #)</small>		

Attachment

24076308

P 03000003135

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 1500
TALLAHASSEE, FLORIDA 32302-1500

REF: DOCUMENT # P03000003135 (HORSE STEEL ORNAMENTAL GENERAL
WELDING, INC).

To Whom It May Concern:

I AM WRITING THIS LETTER BECAUSE I NEVER RECEIVED THE RENEWAL
FORM FOR MY CORPORATION. LAST YEAR, I REQUESTED A CHANGE OF
ADDRESS AND APARENTLY IT WAS NOT CHANGE. PLEASE ACCEPT MY
FORM WITH THE CORRESPONDENT CHECK IN THE AMOUNT OF \$150.00.

RESPECTFULLY YOURS



JUAN I. MORALES