



Roberts MAR 24 2005

2005 FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000035832 1. Entity Name ON SITE WELDING, INC						FILED 05 MAR 18 PM 12:40 SECRETARY OF STATE TALLAHASSEE, FLORIDA REINSTATEMENT 04-05 	
Principal Place of Business 4306 NE 6 AV OAKLAND PARK, FL 33334 US				Mailing Address 4306 NE 6 AV OAKLAND PARK, FL 33334 US			
2. Principal Place of Business 111NW 52CT Suite, Apt. #, etc.		3. Mailing Address 111NW 52CT Suite, Apt. #, etc.		02162005 REIN-P CR2E098 (6/04)			
City & State FT LAUDERDALE, FL		City & State FT LAUDERDALE, FL					
Zip 33309		Country USA		Zip 33309		Country FL	
4. FEI Number 73-1662560				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 GONZALEZ, JOSE 4306 NE 6 AV OAKLAND PARK, FL 33334				7. Name and Address of New Registered Agent Name JOSE GONZALEZ Street Address (P.O. Box Number is Not Acceptable) 111NW 52CT City FT LAUDERDALE FL Zip Code 33309			
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 JOSE GONZALEZ <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE 2-22-05 <small>(NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$900.00							
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GONZALEZ, JOSE 4306 NE 6 AV OAKLAND PARK, FL 33334			<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
VP GONZALEZ, ABRAHAM 2040 SW 37TH TERR FORT LAUDERDALE, FL 33312					<input checked="" type="checkbox"/> Delete		
200049337742 03/29/05--01013--001 **\$900.00							
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: JOSE GONZALEZ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date 2-22-05 Daytime Phone # (954) 9389675			