## 2004 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000053679

City-St-Zip:

Entity Name: NAPLES WELDING AND FABRICATORS, INC.

FILED Nov 17, 2004 Secretary of State

Entity Name: NAPLES WELDING AND F	ABRICATORS, INC.
Current Principal Place of Business:	New Principal Place of Business:
3754 DOMESTIC AVE UNIT C	4001 EXCHANGE AVE. NAPLES. FL 34104 US
NAPLES, FL 34104 US	11/A1 EEO, 1 E 34104 OO
Current Mailing Address:	New Mailing Address:
5325 CATTS ST NAPLES, FL 34114 US	4001 EXCHANGE AVE. NAPLES, FL 34104 US
FEI Number: 01-0795110 FEI Number Appli	ed For() FEI Number Not Applicable() Certificate of Status Desired()
Name and Address of Current Registere	d Agent: Name and Address of New Registered Agent:
PERDOMO, RICARDO 5597 WENDY LN NAPLES, FL 34112 US	ARTURO, ESCOBEDO 5325 CATTS ST. NAPLES, FL 34114 US
The above named entity submits this staten in the State of Florida.	nent for the purpose of changing its registered office or registered agent, or both,
SIGNATURE: ARTURO ESCOBEDO	11/17/2004
Electronic Signature of Re	gistered Agent Date
In accordance with s. 607.193(2)(b), F.S., the corp Election Campaign Financing Trust Fund Contrib	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: P,VP ( ) Delete  Name: ESCOBEDO, ARTURO  Address: 5325 CATTS ST  City-St-Zip: NAPLES, FL 34114 US	Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:
Title: ( ) Delete Name: Address:	Title: VP ( ) Change (X) Addition  Name: RODY, BRUSE  Address: 3475 GOLDNE GATE BLVD W

City-St-Zip: NAPLES, FL 34120 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ARTURO ESCOBEDO P/VP 11/17/2004