	2004 FOR PROFI ANNUAL	T CORPORA	110N		F	ILED	0
DOCUMENT # P03000065283					pr 30,	2004 8:00 ary of Sta) an
1. Entity Nam EXTREMI	e Welding and Fabric	ATION INC.				90228 033 ***150.	
Principal Place	e of Business	Mailing Address					
1118 8 AVE Palmetto, F		1118 8 AVE W Palmetto, FL 33145					
	lace of Business 13 th AVE East	3. Mailing Address	IVE EAST				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		04292004	Chg-P	CR2E034 (10/03)	1
PALMET Zip		City & State PAIMS HO, F Zip	LURINA	4. FEI Number 06 - / 1	698318	P	pplied For lot Applica
34221		34221	USA		of Status Desired		
	6. Name and Address of Current	Registered Agent	Name	0		Registered Agent	
SPIEGEL & 1840 SW 2 4TH FLOO	-			ERIC JAC ess (P.O. Box Number	r is Not Accepta	ble)	
MIAMI, FL			/// 8 City	8th AVE ALMEITO	WEST	FL Zip Co 3 y	
the obligati	named entity submits this statement f ions of registered agent	or the purpose of changing its			th, in the State of	Florida. I am familiar with	and acce
SIGNATURE_	Signature pareo or painted name of registered agen	t and title if applicable. (NOT	E: Registered Agent signature	equired when reinstating)		DATE	<u>. </u>
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.	9. Election Campa .00 Trust Fund Cont		\$5.00 May Be Added to Fees			·
10.	OFFICERS AND		11.	ADDITIONS/	CHANGES TO O	FFICERS AND DIRECTO	
TITLE NAME STREET ADDRESS	PTD JACKSON, ERIC D 1118 8 AVE W	Delete	TITLE NAME STREET ADDRESS			🔲 Change	🛄 Addi
CITY-ST-ZIP TITLE	PALMETTO, FL 33145	Delete	CITY-ST-ZIP TITLE	<u> </u>		Change	Addi
NAME Street address City-st-zip	HINKLE, RICKY A 1118 8 AVE W PALMETTO, FL 33145		NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS		Delete	TTTLE NAME STREET ADDRESS			Change	Addi Addi
City-St-Zip Title Name Street Address City-St-Zip		🗋 Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			🗂 Change	🗌 Addi
TITLE		Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	, <u>,</u>		🔲 Change	Add
STREET ADDRESS	1			,		Change	DDA 🗌
STREET ADDRESS CITY-ST-ZIP ITTLE NAME STREET ADDRESS		Delete	NAME STREET ADDRESS CITY-ST-ZIP				
indicated	certify that the information supplied will on this report or supplemental report poration or the receiver of trustee emp or on an attachment with an address,	th this filing does not qualify fo	NAME STREET ADDRESS CITY-ST-ZIP r the exemption stated my signature shall have	e the same legal effec	t as if made und	er oath; that I am an office	informatio ar or direct