2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State
05-03-2004 91004 002 ***150.00

DOCUMENT # P03000081256

1. Entity Name
FRIENDLY WELDING, INC.

Principal Place of Business	Mailing Address
8000 N.W. 37TH AVENUE MIAMI, FL 33147	8000 N.W. 37TH AVENUE MIAMI, FL 33147

14019299

03162004 Chg-P CR2E034 (10/03)

2. Principal Place of Business	3. Mailing Address
4600 E. 10 LANE	8427 CRESPI BLVD.
Suite, Apt. #, etc.	Suite, Apt. #, etc. #1
City & State: HIALEAH - FL	City & State: MIAMI BEACH - FL
Zip: 33013 Country: U.S.A.	Zip: 33141 Country: U.S.A

4. FEI Number: 05-0579061 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COSTELLA, PABLO D
8000 N.W. 37TH AVENUE
MIAMI, FL 33147

7. Name and Address of New Registered Agent

Name: PABLO D. COSTELLA
Street Address (P.O. Box Number is Not Acceptable)
4600 E. 10 LANE
City: HIALEAH FL Zip Code: 33013

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: [signature] PABLO D. COSTELLA 3-16-04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PSD	☒ Delete	TITLE	PSD	☒ Change ☐ Addition
NAME	BORDOGNA, HORACIO E		NAME	HORACIO E. BORDOGNA	
STREET ADDRESS	8000 N.W. 37TH AVENUE		STREET ADDRESS	4600 E. 10 LANE	
CITY-ST-ZIP	MIAMI, FL 33147		CITY-ST-ZIP	HIALEAH - FL 33013	
TITLE	VD	☒ Delete	TITLE	VD	☒ Change ☐ Addition
NAME	BORDOGNA, ADRIANA M		NAME	ADRIANA M. BORDOGNA	
STREET ADDRESS	8000 N.W. 37TH AVENUE		STREET ADDRESS	4600 E. 10 LANE	
CITY-ST-ZIP	MIAMI, FL 33147		CITY-ST-ZIP	HIALEAH - FL 33013	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

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: [signature] HORACIO E. BORDOGNA 3-16-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #