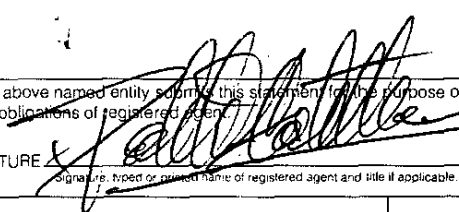
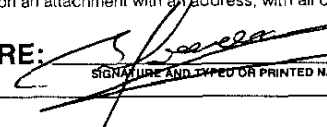


2004 FOR PROFIT CORPORATION ANNUAL REPORT

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 8000 N.W. 37TH AVENUE MIAMI, FL 33147			Mailing Address 8000 N.W. 37TH AVENUE MIAMI, FL 33147		
2. Principal Place of Business 4600 E. 10 LANE Suite, Apt. #, etc.		3. Mailing Address 8427 CREPI BLVD. Suite, Apt. #, etc. #1			
City & State HALEAH-FL Zip 33013 Country U.S.A.		City & State MIAMI BEACH-FL Zip 33141 Country U.S.A.		4. FEI Number 05-0579061	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable ☐	
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 HALEAH 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  PABLO D. COSTELLA 3-16-04 (NOTE: Registered Agent signature required when reinstating)					
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 NAME STREET ADDRESS CITY-ST-ZIP	PSD BORDOGNA, HORACIO E 8000 N.W. 37TH AVENUE MIAMI, FL 33147	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASD HORACIO E. BORDOGNA 4600 E. 10 LANE HALEAH-FL 33013
☒ Change ☐ Addition		☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BORDOGNA, ADRIANA M 8000 N.W. 37TH AVENUE MIAMI, FL 33147	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ADRIANA M. BORDOGNA 4600 E. 10 LANE HALEAH-FL 33013
☒ Change ☐ Addition		☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
☐ Change ☐ Addition		☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
☐ Change ☐ Addition		☐ Delete			
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:  HORACIO E. BORDOGNA 3-16-04 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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03162004 Chg-P CR2E034 (10/03)