2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000120121

Entity Name: ALL TYPE WELDING INC.

FILED Apr 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1000 NW 113TH AVENUE 3750 SE HWY. 41

OCALA, FL 34482 MORRISTON, FL 32668

Current Mailing Address: New Mailing Address:

1000 NW 113TH AVENUE P.O. BOX # 8

OCALA, FL 34482 MORRISTON, FL 32668

FEI Number: 20-0339994 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FALLON, DAVID L P FALLON, TAMMY P 1000 NW. 113TH AVE. 3750 S.E. HWY. 41

OCALA,FL., FL 34482 US MORRISTON, FL 32668 US

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.

SIGNATURE: TAMMY FALLON 04/27/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 FALLON, DAVID L
 Name:
 FALLON, DAVID L

 Address:
 1000 NW 113 AVENUE
 Address:
 P.O. BOX # 8

 Address:
 1000 NW 113 AVENUE
 Address:
 P.O. BOX # 8

 City-St-Zip:
 OCALA, FL 34482
 City-St-Zip:
 MORRISTON, FL 32668

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 FALLON, TAMMY
 Name:
 FALLON, TAMMY

 Address:
 1000 NW 113 AVENUE
 Address:
 P.O. BOX # 8

City-St-Zip: OCALA, FL 34482 City-St-Zip: MORRISTON, FL 32668

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: TAMMY FALLON VP 04/27/2006