2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P04000013489 07-18-2005 90042 028 ***150.00 1. Entity Name RANNY'S MOBIL WELDING INC. Mailing Address Principal Place of Business 50055573 4840 NW 11TH PL. 4840 NW 11TH PL. LAUDERHILL, FL 33313 LAUDERHILL, FL 33313 2. Principal Place of Business 730 WW7 ** 3. Mailing Address Suite, Apt. #, etc. 07062005 CR2E034 (10/03) 4. FELNumber. ... Applied.For-City & State_ City & State 30-022938 Fŧ. Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent WALKER, RANDOLPH Street Address (P.O. Box Number is Not Acceptable) 4840 NW 11TH PL. LAUDERHILL, FL 33313 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable \$5.00 May Be 9. Election Campaign Financing In accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 7, 2005 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. ☐ Addition Delete ☐ Change PD TITLE TITLE WALKER, RANDOLPH NAME NAME STHEET ADDRESS 4840 NW-11TH-PL-STREET ADDRESS CITY-ST-ZIP LAUDERHILL, FL 33313 CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE MARKE HAJAE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete 117LE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filling 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.

Kandolph

SIGNATURE:

FILED Jul 18, 2005 8:00 am