

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028297

Entity Name: MATTHEW'S WELDING, INC.

FILED  
Feb 14, 2008  
Secretary of State

## Current Principal Place of Business:

43 3RD ST  
BONITA SPRINGS, FL 34134

## New Principal Place of Business:

## Current Mailing Address:

43 3RD ST  
BONITA SPRINGS, FL 34134

## New Mailing Address:

FEI Number: 68-0578515

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRIIA, MATTHEW A  
43 3RD ST  
BONITA SPRINGS, FL 34134 US

## Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC  
813 ELTONA BLVD  
STE A  
DELTONA, FL 32725 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: ANAY VALCARCEL

02/14/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FRIIA, MATTHEW A  
Address: 43 3RD ST  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: T (X) Delete  
Name: FRIIA, MARGUERITE E  
Address: 43 3RD ST  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: S (X) Delete  
Name: FRIIA, MATTHEW  
Address: 43 3RD ST  
City-St-Zip: BONITA SPRINGS, FL 34134

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FRIIA, MATTHEW  
Address: 43 3RD ST  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MATTHEW FRIIA

P

02/14/2008

Electronic Signature of Signing Officer or Director

Date