

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000092757

FILED  
Oct 07, 2005  
Secretary of State

Entity Name: PERFORMANCE WELDING & FABRICATION INC.

**Current Principal Place of Business:**

949 WAGNER PLACE  
FT PIERCE, FL 34982

**New Principal Place of Business:**

**Current Mailing Address:**

949 WAGNER PLACE  
FT PIERCE, FL 34982

**New Mailing Address:**

FEI Number: 20-1266166

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DEVEREUX, BRIAN  
240 CORRINNE RD  
FT PIERCE, FL 34945 US

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

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: BRIAN C. DEVEREUX

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DEVEREUX, BRIAN  
Address: 240 CORRINNE RD  
City-St-Zip: FT PIERCE, FL 34945

Title: D ( ) Delete  
Name: SMITH, JERRY  
Address: 4980 SEARS ST  
City-St-Zip: FT PIERCE, FL 34981

Title: V ( ) Delete  
Name: SMITH, JERRY JR.  
Address: 4980 SEARS STREET  
City-St-Zip: FORT PIERCE, FL 34981

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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 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 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: JERRY R. SMITH

D

10/07/2005

Electronic Signature of Signing Officer or Director

Date