

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000099878

FILED  
Aug 09, 2005  
Secretary of State

Entity Name: ARCH ANGEL MOBILE WELDING INC

## Current Principal Place of Business:

604 TATUM RD.  
SARASOTA, FL 34240 US

## New Principal Place of Business:

2820 SUNCREST DRIVE  
SARASOTA, FL 34239 US

## Current Mailing Address:

604 TATUM RD.  
SARASOTA, FL 34240 US

## New Mailing Address:

2820 SUNCREST DRIVE  
SARASOTA, FL 342439 US

FEI Number: 74-3137103

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NORRITO, SHIRLEY  
604 TATUM RD.  
SARASOTA, FL 34240 US

## Name and Address of New Registered Agent:

NORRITO, SHIRLEY  
2820 SUNCREST DRIVE  
SARASOTA, FL 342439 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: SHIRLEY NORRITO

08/09/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: NORRITO, MICHAEL  
Address: 604 TATUM RD.  
City-St-Zip: SARASOTA, FL 34240 US

Title: S ( ) Delete  
Name: NORRITO, SHIRLEY  
Address: 604 TATUM RD.  
City-St-Zip: SARASOTA, FL 34240 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: NORRITO, MICHAEL  
Address: 2820 SUNCREST DRIVE  
City-St-Zip: SARASOTA, FL 34239 US

Title: S (X) Change ( ) Addition  
Name: NORRITO, SHIRLEY  
Address: 2820 SUNCREST DRIVE  
City-St-Zip: SARASOTA, FL 34239 US

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: MICHAEL NORRITO

P

08/09/2005

Electronic Signature of Signing Officer or Director

Date