2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 21, 2006 08:00 AM Secretary of State DOCUMENT # P04000156131 1. Entity Name GUMBY'S WELDING INC. Principal Place of Business Mailing Address **3020 NAUTICAL WAY 3020 NAUTICAL WAY** LAKE WORTH, FL 33462 LAKE WORTH, FL 33462 01302006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 30-0291305 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HALL IV, ROY A DO NOT WRITE 3020 NAUTICAL WAY LAKE WORTH, FL 33462 IN THIS SPACE 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PST TITLE NAME HALL, ROY A IV STREET ADDRESS 3020 NAUTICAL WAY CITY-ST-ZIP LAKE WORTH, FL 33462 U00000523475 TITLE 05/03/06-80074-006 150.00 STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP ππ.€ STREET ACCRESS CITY-ST-ZIP NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or suppliemental 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 of trustee impowered 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.

SIGNATURE:

CITY-ST-ZIP

NONATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

4/19/06 3

FILED