2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000005221

1. Entity Name

T.G.R. GENERAL WELDING INC.



Principal Place of Business

12190 N.W. 98 AVENUE

BAY #9

HIALEAH GARDEN, FL 33018

Mailing Address

12190 N.W. 98 AVENUE

BAY #9

HIALEAH GARDEN, FL 33018

FILED Apr 30, 2007 8:00 am Secretary of State

04-30-2007 90401 024 ***150.00

40088103



DO NOT WRITE IN THIS SPACE

04162007 No Chg-P

CR2E034 (11/05)

4. FEI Number Applied For S1-0533320 Not Applied For Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MARQUEZ, RAMON 7288 WEST 34TH AVENUE HIALEAH, FL 33018

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity subfitts this statement for the pions of registered agent	ourpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURES	Signifure, possibly ported name of registered agent and title	if applicable (NOTE: Registered	Agent signature	e required when reinstating)	04 19 07 DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financ Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARQUEZ, RAMON 7288 WEST 34TH AVENUE HIALEAH, FL 33018	:				
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-7IP						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE: >

CHATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04 halo7

Daytime Phone #