


2007 FOR PROFIT CORPORATION ANNUAL REPORT


FILED
May 10, 2007 08:00 A
Secretary of State

DOCUMENT # P05000057495
 1. Entity Name
 ADVANCED WELDING SOLUTIONS, INC.



Principal Place of Business Mailing Address
 7725 W 26 AVE F5 7725 W 26 AVE F5
 HIALEAH, FL 33016 HIALEAH, FL 33016

DO NOT WRITE IN THIS SPACE



04142007 No Chg-P CR2E034 (11/05)

4. FEI Number 20-3016758	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GATO, VICENTE
 315 W 63RD ST
 HIALEAH, FL 33012

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000764647
 05/31/07-80004-012 50.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GATO, VICENTE 315 W 63RD ST HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP GATO, MARTHA 315 W 63RD ST HIALEAH, FL 33012
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 life empowered.

SIGNATURE:  Date: 5/10/07 Daytime Phone #: 786 201 1526

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR