2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000133667 1. Entity Name						FILED 2007 DEC 31 AM 8: 44			
MONTIS WELDING & FABRICATION, INC.							2007 DEC 31	AM O.	, 4
Principal Plac 1514 WEAVE LUTZ, FL 33	R DR	S	Mailing Address 1514 WEAVER DR LUTZ, FL 33559				TALLAHASSI	UF STAT E. FLOR	IDA
Principal Place of Business - No P.O. Box # 3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			~~44.1: 49009 **			AA
City & State			City & State			A. FEI NUMB	<u> </u>	2098 (1/07) AF	oplied For
Zip Country		Zip Coun		ntry	20-355		\$8.75 Add	ot Applicable ditional	
	6. Name and Address of Current		t Registered Agent	<u> </u>			of Status Desired	Fee Require	đ
LODEZ M				Name					
LOPEZ, M 1514 WEA LUTZ, FL	VER DR			Street Addre		(P.O. Box Number is Not Acceptable)			
					City	······································	F	L Zip Cod	e
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									
FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the									
	4	08, Fee will be \$300.	00				corporation did not rece		
10. OFFICERS AND DIRECTORS 11.						ADDITIONS,	CHANGES TO OFFICERS A		
TITLE NAME	D Delete IIIL					10条厂	#113520 #4035208	☐ Change ☐ ☐ ☐	Addition
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CITY-ST-ZIP				CIT	Y-ST-ZIP				
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: 11-27-07 (213) 917-607									
		SIGNATURE AND TYPESTOR	PRINTED NAME OF SIGNING OFFICE	ER OR DIREC	TOP		Date	Daytime Phone #	i