

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000029916

FILED
Apr 07, 2004
Secretary of State

Entity Name: G -N- C WELDING AND PIPING, INC.

Current Principal Place of Business:

PO BOX 32082
WEST PALM BEACH, FL 334202082 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 32082
WEST PALM BEACH, FL 334202082 US

New Mailing Address:

FEI Number: 65-0406615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LINCUL, GARY
2660 HOPE LANE
PALM BEACH GARDENS, FL 33410 US

Name and Address of New Registered Agent:

LINCUL, GARY
PO BOX 32082
WEST PALM BEACH, FL 33420 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:

04/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: LINCUL, GARY
Address: PO BOX 32082
City-St-Zip: WEST PALM BEACH, FL 334202082

Title: P () Delete
Name: LINCUL, CONNIE
Address: PO BOX 32082
City-St-Zip: WEST PALM BEACH, FL 334202082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CONSTANCE LINCUL

PRES

04/07/2004

Electronic Signature of Signing Officer or Director

Date