May 24, 1999 8:00 am Secretary of State

05-24-1999 90021 030 \*\*\*150.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000079333

Corporation Name

JET WELDING SERVICES, INC.

								(( <b>1886</b>
Principal Place	e of Business	Mailing Address				IZDI BUDUN UUNU BUDUN	ABNIC SERVE LESER STIES	HANDE SHE DOUT
4618 E. TENTH CT HIALEAH FL 33013		4618 E. TENTH CT HIALEAH FL 33013						
US	·	US _	<u>.</u> -	-		OT WRITE IN	THIS SPACE	
					3. Date Incorporated or 11/17/1993	Qualifed		
2. Principal Pl	face of Business	2a. Mailing Address			4. FEI Number		<u> </u>	plied For
21		26			65-0448368			t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status D	esired 🗍	\$8.75 A Fee Re	
"City & State	е	City & State			6. Election Campaign Fi	nancing	\$5.00	May Be
23		28			Trust Fund Contribution	<u>on</u>	Added to	o Fees
Zíp	Country	Zip	Country		8. This corporation owes	· ·		I
24	25	29	30		Personal Property Tax			□No
	9. Name and Address of Curre	nt Registered Agent	04	Name	10. Name and Address	of New Registe	ered Agent	
	RIN, JORGE L		81 82	Name M	ORINI SORGE	t Acceptable)		
	) SW 134TH AVENUE JII FL 33175			220	3 10.00- 208	TEK _		
Miran	W 1 E 00170		83	PEMB	ROVE PINES,	FL 3	3029	Sada
	·		84	City —		<del> </del>	FL 85 Zip C	
11. Pursuant	to the provisions of Sections 607.05						eo of changing ite	
	ogistered agent or both in the State	UZ and 607.1508, Florida Statu of Florida, Such channe was :	ites, the above	e-named corp the corporation	poration submits this statement	nt for the purpo: by accept the a	appointment as rec	registered
office or re agent. I ai	egistered agent, or both, in the State m familiar with, and accept the oblig-	e of Florida. Such change was a	authorized by t	the corporation	poration submits this statement ion's board of directors, I here	by accept the a	appointment as reg	gistered
agent. I ai SIGNATURE	egistered agent, or both, in the State m familiar with, and accept the obligation of the State o	e of Florida. Such change was a ations of, Section 607,0505, Florida.	authorized by torida Statutes.	the corporate	ion's board of directors. I here	by accept the a	23/99	registered gistered
agent. I ai	egistered agent, or both, in the State m familiar with, and accept the obligation TOLBE L. MOLLI Signature, typed or printed name of registered age	e of Florida. Such change was a ations of, Section 607,0505, Florida, July 100,000 (NOT and the interpretable).	authorized by torida Statutes.  E: Registered Agent	the corporate	ed when reinstating)	5/2	23/99	gistered
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP