

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**CORPORATION
ANNUAL REPORT
1995**FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS**APPROVED
AND
FILED**

95 JUN 16 PM 3:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**DOCUMENT # P94000036814**

1. Corporation Name

Florweld, Inc.

Principal Place of Business

Mailing Address

11242 Royal Palm Blvd.
Coral Springs, Florida
3306511242 Royal Palm Blvd.
Coral Springs, Florida 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

5/16/94

4. FEI Number

Applied For

65-0504489

Not Applicable

5. Certificate of Status Desired

☐**\$8.75 Additional
Fee Required**6. Election Campaign Financing
Trust Fund Contribution☐**\$5.00 May Be
Added to Fees**8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes☐ Yes☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Steven M. Charchat, Esq.
Tumpson & Charchat, P.A.
848 Brickell Avenue
Suite 400
Miami, Florida 33131

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature (Type or printed name of registered agent and title of corporation)

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

P, S, T, D
NAME Jean-Claude Pasquet
STREET ADDRESS 11242 Royal Palm Blvd.
CITY, ST, ZIP Coral Springs, Florida 3306511 TITLE ☐ Change ☐ Addition
12 NAME 000001517230
13 STREET ADDRESS -06/20/95--01044--013
14 CITY, ST, ZIP *****225.00 *****225.00VP
NAME Florette Pasquet
STREET ADDRESS 11242 Royal Palm Blvd.
CITY, ST, ZIP Coral Springs, Florida 3306521 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY, ST, ZIPNAME
STREET ADDRESS
CITY, ST, ZIP31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY, ST, ZIPNAME
STREET ADDRESS
CITY, ST, ZIP41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY, ST, ZIPNAME
STREET ADDRESS
CITY, ST, ZIP51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY, ST, ZIPNAME
STREET ADDRESS
CITY, ST, ZIP61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY, ST, ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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.

SIGNATURE:

Jean-Claude Pasquet, President

1-305-752-9057

Type or printed name of signing officer or director

(Title)

(Telephone Number)