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03-08-1999 90089 013 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **P94000045564**

1. Corporation Name
ADAMS WELDING, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business: 1407 26TH AVENUE, EAST BRADENTON FL 34208
 Mailing Address: 1407 26TH AVENUE, EAST BRADENTON FL 34208

3. Date Incorporated or Qualified: **06/13/1994**

4. FEI Number: **65-0501128** Applied For: 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 owes the current year Intangible Personal Property Tax: Yes No

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: **ADAMS, CHARLES M, 1407 26TH AVENUE, EAST, BRADENTON FL 34208**

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	NAME: ADAMS, CHARLES M	1.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 6610 28TH AVENUE, EAST	CITY-ST-ZIP: BRADENTON FL 34208	1.2 NAME:	
	<input type="checkbox"/> DELETE	1.3 STREET ADDRESS:	
		1.4 CITY-ST-ZIP:	
TITLE: VPS	NAME: ADAMS, MICHAEL SCOTT M	2.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 6610 28TH AVENUE, EAST	CITY-ST-ZIP: BRADENTON FL 34208	2.2 NAME:	
	<input type="checkbox"/> DELETE	2.3 STREET ADDRESS:	
		2.4 CITY-ST-ZIP:	
TITLE:	NAME:	3.1 TITLE: 2nd Vice-President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS:	CITY-ST-ZIP:	3.2 NAME: Charles M. Adams, Jr.	
	<input type="checkbox"/> DELETE	3.3 STREET ADDRESS: 7004 41 Avenue East	
		3.4 CITY-ST-ZIP: Bradenton Fl. 34208	
TITLE:	NAME:	4.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:	CITY-ST-ZIP:	4.2 NAME:	
	<input type="checkbox"/> DELETE	4.3 STREET ADDRESS:	
		4.4 CITY-ST-ZIP:	
TITLE:	NAME:	5.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:	CITY-ST-ZIP:	5.2 NAME:	
	<input type="checkbox"/> DELETE	5.3 STREET ADDRESS:	
		5.4 CITY-ST-ZIP:	
TITLE:	NAME:	6.1 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:	CITY-ST-ZIP:	6.2 NAME:	
	<input type="checkbox"/> DELETE	6.3 STREET ADDRESS:	
		6.4 CITY-ST-ZIP:	

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.

SIGNATURE: *Charles M. Adams* 2-19-99 941-748-5460
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)