FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT

1997

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 01 1997 8:00am

Secretary of State

Change

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Addition

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Addition

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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000067498 (3)

GRUMPY'S WELDING AND FABRICATING, INC.

Principal Place 2345 8W 34TH BAY #3 FT LAUDERDA		Mailing Address 2345 SW 34TH ST BAY #3 FT LAUDERDALE FL 33312-5046								
US .			U\$				3. Date Incorporated or Qualified 09/14/1994	3a. Date of Last Report 06/14/1996		
2. Principal Place of Business 21			2e. Mailing Address 26				4. FEI Number 65-0537703	Applied For Not Applicable		
Sulte, Apt. #, etc.			Suite, Apt. #, etc. 27				5. Certificate of Status Desired		Additional Required	
City & State 23 Zip Country			City & State				Election Campaign Financing Trust Fund Contribution		May Be I to Fees	
Zip	25	·	29	ib	30 Cou	ntry		Yes 🔲 No	s. 199.032,	
 	9. Name and A ATHER, ROGER	Address of Current	Register	red Agent		81 Name	10. Name and Address of New Re	gistered Agent		
2093 SW 45TH CT FT LAUDERDALE FL 33315 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was ault agent. I am familiar with, and accept the obligations of, Section 607.0505 Florida SIGNATURE Signature typed or printed name of legistered agent and tilled applicable. (NOTL He signature)						84 City	isi	F1 85 Zg	Code its registered s registered	
12.		OFFICERS AND	DIRECTO		13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	RS IN 12	
TITLE NAME STREET ADORESS CITY-ST-ZIP	PRATHER, ROG 4847 SW 22ND FT LAUDERDA) Terr Lto 65		□ DELETE				☐ Change	Addition	
TITLE NAME STREET ADDRESS				DELETE		ME REET ADDRESS		☐ Change	Addition	
CITY-ST-ZIP TITLE NAME STREET ADDRESS				☐ DELETE	3.1 Tri 3.2 NA			☐ Change	Addition	
CITY-ST-ZIP					1	TY-\$T-ZIP	•			

ITY-ST-2IP 6.4 City-S1-2IP 6.4 City-S1-2IP 6.4 City-S1-2IP 6.4 To hereby certify that the information supplied with this filling 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.

4.1 TITLE

4. 2 NAME

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREE1 ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE O.... NO BUILDING NO DE COMPANION DE COMPANION

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