## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

## FILED Feb 26, 2005 08:00 AM DOCUMENT # P95000012516 **Secretary of State** 1. Entity Name CPM MOBILE WELDING, INC. Principal Place of Business Mailing Address CPM MOBILE WELDING INC CPM MOBILE WELDING INC 4900 PALMETTO DRIVE 4900 PALMETTO DR FORT PIERCE, FL 34982 US FT PIERCE, FL 34982 02172005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 65-0560927 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MORRISON, PRESTON DO NOT WRITE 4900 PALMETTO DR FT. PIERCE, FL 34982 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10, OFFICERS AND DIRECTORS TITLE MORRISON, PRESTON NAME STREET ADDRESS 4900 PALMETTO DR CITY-ST-ZIP FT PIERCE, FL U00000244256 TITLE 02/26/05-80012-023 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP