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

NAME

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

Mar 11 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P95000025092 (4) DIANOR MACHINE SHOP & WELDING SERVICES, CORP. Principal Place of Business Mailing Address 3679 N.W. 47TH STREET 3679 N.W. 47TH STREET MIAMI FL 33142 MIAMI FL 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/28/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0576627 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes D No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 DIAZ, LUISA H 3679 N.W. 47TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33142** 83 84 City 85 Zip Code fions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered gent, or both, if the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered ith, and accept the applications of Section 607.0505, Florida Statutes. 11. Pursuant to the g office or register ed agent, or both, ar with, and acce SIGNATURE (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CR2E034 (10/97 13. DELETE Change Addition TITLE 1.5 TITLE DIAZ, NORBERTO NAME 1.2 NAME 3082 N.W. 32ND STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33142** CITY - ST- ZIP 1.4 CITY - \$1 - ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-\$1-2IP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4 1 TITLE NAME a 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITE F 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST- ZIP Change DELETE Addition TITLE 6.1 TITLE 100002454811

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

14. I heroby 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 repoiver or trustee ampowered 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 affactive of the corporation of the repoiver or trustee ampowered 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 affactive of the corporation of the repoiver of the corporation of the repoiver or trustee ampowered 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 affactive of the corporation of the repoiver of the repoire of the corporation of the repoire of the corporation of the repoire of 3-4-98

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