

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90382 039 ***150.00

DOCUMENT # P95000074883

1. Entity Name
GLOBAL MARINE WELDING, INC.



Principal Place of Business Mailing Address
7700 N KENDALL DR SUITE 415 **7700 N KENDALL DR SUITE 415**
MIAMI, FL 33156 **8660 W. Flagler St. #200** **MIAMI, FL 33156**
MIAMI, FL 33144

4005120



01272006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0611969** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

LEITMAN, LORN
7700 N KENDALL DR SUITE 415 **8660 W. Flagler St. #200**
MIAMI, FL 33156 **MIAMI, FL 33144**

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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)

4/5/06
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KENDALL, TIMOTHY A
STREET ADDRESS	21451 SW 147TH
CITY-ST-ZIP	MIAMI, FL 33187
TITLE	D
NAME	LEITMAN, LORN
STREET ADDRESS	7700 N KENDALL DR., #405 8660 W. Flagler St. #200
CITY-ST-ZIP	MIAMI, FL 33156 MIAMI, FL 33144
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-04-06 305 321 3806

Date

Daytime Phone #