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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000078518 (3)

WELSH'S TOOL & DIE INC

## **FILED** Feb 26 1998 8:00am Secretary of State



<del></del>		6 d - 11 A - A - A						
Principal Place of Business		Mailing Address						
1514 NW 3RD STREET DEERFIELD BEACH FL 33442		1514 NW 3RD STREET DEERFIELD BEACH FL 33442				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 09/19/1996		
2. Principal Pl	ace of Business	2a. Mailing Address			•	4. FEI Number	A	oplied For
21		26				65-0690025	N	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22		27				g. outmosts of class position		lequired
City & State		City & State				6. Election Campaign Financing \$5.00 May Be		
23		Zip Country				Trust Fund Contribution		to Fees
Zιρ	Country	Zip	_	шиу		<ol><li>This corporation owes or has paid the or Personal Property Tax due June 30.</li></ol>		ntangible No
24	25 25 Name and Address of Current		30			10, Name and Address of New Registered		100
9. Name and Address of Current Registered Agent					Name	TO, THE THE PLANT OF THE PLANT		
	LSH, PAUL							
	4 NW 3RD STREET			82	Street Address (P.O. Box Number is Not Acceptable)			
DE	ERFIELD BEACH FL 33442			83				
				84	City	Fi	<b>65</b> Zip	Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the al	<u>L_1</u> bove	named co	rooration submits this statement for the nurnose	of changing	its registered
office or re agent. I a	egistered agent, or both, in the State om familiar with, and accept the obligat	f Florida. Such change was au ions of, Section 607.05 <mark>05</mark> , Flor	uthorize rida Stat	d by tutes	the corpor	ation's board of directors. I hereby accept the ap	pointment as	s registered
SIGNATURE	Signature, typed or printed name of registered agent	and the dispersion (NOTE)	Donictore	d Ago	ot cionet ve rea	ulred when reinstating) DATE		<del></del>
12.	OFFICERS AND		13.	u ngo	nt signatore req	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTO	RS IN 12
TITLE	D			1.1 TITLE			Change	
NAME	WELSH, PAUL		1.2 N/	AME				
STREET ADDRESS	1514 NW 3RD STREET		1.3 \$1	TREET.	ADDRESS			
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		1.4 CI	ITY - \$1	r-ZIP			
TITLE			2.1 TI	TLE			Change	Addition
NAME			2.2 N	AME				
STREET ADDRESS			2.3 ST	TREET	ADDRESS			
CITY-ST-ZIP			2.40	ITY-S	T-ZIP			
TITLE		☐ DELETE	3.1 11	TLE			☐ Change	Addition
NAME			3.2 N/	AME	1			
STREET ADDRESS			3.3 St	REET.	ADDRESS			
CITY-ST-ZIP			3.4. C	ITY-S	T-ZIP			
TITLE		☐ DELETE	4.1 31	TLE			☐ Change	☐ Addition
NAME			4.2 N	IAME				
STREET ADDRESS			4.3 \$1	TREET.	ADDRESS			
CITY-ST-ZIP			4.4 CI	1Y-S1	r-ZIP			F-1 (
TITLE		☐ DELETE	5.1 TI	ŦLE			☐ Change	☐ Addition
NAME			5.2 N/	AME				
STREET ADDRESS			5.3 S1	REET.	ADDRESS			
CITY-ST-ZIP			5.4 CI	ITY-\$1	r-ZIP		<del></del>	
TITLE		DELETE	6.1 TI	TLE		ets.	Change	Addition
NAME			6.2 N/	AME	"			
STREET ADDRESS			6.3 ST	TREET	ADDRES\$			
0/0/ 07 7/0			0.4.01	ITV ČI	r 340			

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 en arrallachment with an address.