
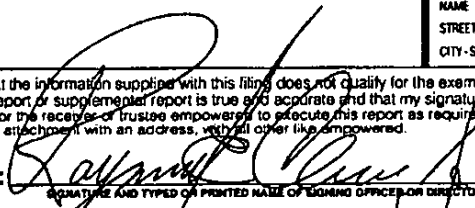


FILED
Jul 29, 2005 8:00 am
Secretary of State

07-08-2005 90024 031 ***150.00

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000012444			
1. Entity Name ATAP METAL WORKS, INC.			
Principal Place of Business 14075 NW 19 AVE. OPA-LOCKA, FL 33054		Mailing Address 14075 NW 19 AVE. OPA-LOCKA, FL 33054	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
JE CLINE, RAYMOND E 14075 NW 19 AVE. OPA-LOCKA, FL 33054		Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST CLINE, RICHARD E JR. 7618 FAIRWAY BLVD. MIRAMAR, FL 33023 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPST CLINE, RAYMOND E. JR. 7618 FAIRWAY BLVD MIRAMAR, FL 33023 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 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: 		Date: 07/05/05 Daytime Phone #: 305 687 4044	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	

66025221



07052005 Chg-P CR2E034 (10/03)

4. FEI Number **65-0737668** Applied For Not Applicable

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

ATTACHMENT

66025221

ATAP Metal Works Inc
14075 NW 19 Ave
Opa Locka FL 33054

July 25, 2005

FL Department Of State
Division Of Corporation
PO Box 6327
Tallahassee FL 32314

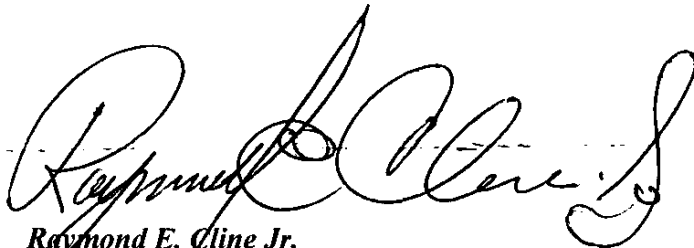
RE: P97000012444

Dear Division Of Corporation,

Please, be advised that we never received a notice for annual filing fee. We have no internet connection at all. It took us a long time to get a form from the internet and finally we could mail it.

Please, if it is possible wave the penalty from our account.

Sincerely,



Raymond E. Cline Jr.
President