### 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## ANNUAL REPORT DOCUMENT # P97000031401

1. Entity Name ARC ON WELDING, INC.

Principal Place of Business 5319 SUNWOOD RD PANAMA CITY, FL 32404 Mailing Address

5319 SUNWOOD RD PANAMA CITY, FL 32404

## FILED Apr 26, 2007 8:00 am Secretary of State

04-26-2007 90238 040 \*\*\*150.00

40084911



### DO NOT WRITE IN THIS SPACE

04192007 No Chg-P CI

CR2E034 (11/05)

4. FEI Number 59-3441890

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SUGGS, LARRY 5319 SUNWOOD RD PANAMA CITY, FL 32404

# DO NOT WRITE IN THIS SPACE

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the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed harne of registered agent and title	if applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE
	E NOWI!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADORESS CITY-ST-ZIP	V SUGGS, JASON 20809 HURST RD FOUNTAIN, FL 32438				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SUGGS, LARRY 7302 RESOTA LN. SOUTH PORT, FL 32409				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T COTER, CHRISTOPHER 716 COLLEGE AVE PANAMA CITY, FL 32401		~ ·	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRUCE, CINDY 9833 RESOTA BCH RD PANAMA CITY, FL 32409			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME					

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 accurage 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 the receiver or the receiver or the receiver of the corporation or the receiver or the receiver of the corporation or the receiver or the receiver of the corporation or the receiver or the receiver of the corporation or the receiver or the receiver

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

QUATURE AND TYPED OR PROPED SAME A SIGNING OFFICER OR DIRECTOR

4-24-07 8507841832

### ATTACHMENT

HONORABLE GEORGE RICK BARNETT BAY COUNTY PROPERTY APPRAISER 40084911 650 MULBERRY AVE. PANAMA CITY, FL 32401-2672

Tangible Personal Property Tax Return Confidential §§ 193.074 F.S. As Required by §§ 193.052 & 193.062 F.S. Return to County Property Appraiser By April 1 to Avoid Penalties State of Florida, County of BAY

Business Name (DBA - Doing Business As) and Mailing Address

ARC ON WELDING 5319 SUNWOOD RD PANAMA CITY, FL 32404

> Federal Employer Iden. No. 59-3441890 Social Security Number

NAICS/SIC If name and address is incorrect make necessary corrections 5 Date you began bus. In this county: 01-01-1997 Fiscallyr:  $\underline{JAN}$  -  $\underline{DEC}$ This return subject to audit with all records kept by you. Incomplete entries are subject to penalties. 5a. Although my fiscal yr. ended prior to Dec. 31 of the past calendar yr., this return reflects property additions and deletions through December 31.
Yes \_\_\_\_ No \_\_X 1. Please give name and telephone number of Owner or Person in charge of this Business. 6. Describe Type or Nature of Your Business: Name LARRY SUGGS WELDING Telephone 7. Trade Level (Check as many as apply) Retail Wholesale Manufacturing Corporate Name ARC ON WELDING INC 2. Actual Physical Location of Property for Which this Return is Filed (St. Address-Not P.O. Box) Professional Service Agriculture Leasing/Rental Other 5319 SUNWOOD ROAD, PC, FL 8. Did you file a Tangible Personal Property Return in this county last Yr.? Yes No 3. Is your business or farm located within the incorporated limits of a City? Yes No  ${f X}$ If so, under what name and where? What City? 4. Do You File a Tangible Personal Property Tax Return Under Any Other Name? Yes No  ${f X}$ 9. Former owner of the Business: 9a. If Business sold, to whom? Please Show name Exactly as it Appeared on Your most recent Personal Property Tax Bill or Other Current Tax Return. Date Sold Personal Property Summary
THIS IS A SUMMARY SCHEDULE ONLY. The Schedules on the PAGE 2
must be completed in detail and TOTALS entered below. ATTACH ITEMIZED LIST or
DEPRECIATION SCHEDULE showing Original Cost & Date of Acquisition. Taxpayer's Estimate of Original Appraiser's Installed Fair Market Value Use only Cost 10. Office Furniture & Office Machines & Library 2,862 11. EDP Equipment, Computers, Word Processors 12. Store, Bar & Lounge, and Restaurant Furniture & Equipment, Etc. 74,951 13. Machinery and Manufacturing Equipment 14. Farm, Grove, and Dairy Equipment 15. Professional, Medical, Dental & Laboratory Equipment 16. Hotel, Motel, & Apartment Complex 16a.Rental Units - Stove, Refrig., Furniture, Drapes & Appliances 17. Mobile Home Attachments (Carport, Utility Bldg., Cabana, Porch, Etc.) 18. Service Station & Bulk Plant Equipment - Underground Tanks, Lifts, Tools 19. Signs-Billboard, Pole, Wall, Portable, Directional, Etc. 20. Leasehold improvements must be grouped by type, yr. of installation & description 21. Pollution Control Equipment 22. Equipment owned by you but rented, leased or held by others 23. Supplies-Not Held for Resale 24. Other-Please Specify 77,813 **TOTAL PERSONAL PROPERTY** LESS EXEMPTION: ( ) WIDOW ( ) WIDOWER ( ) BLIND ( ) TOTAL DISABILITY ( ) OTHER Under penalties of perjury, I declare that I have read the foregoing tax return and the accompaying schedules and statements and that the facts stated in Taxable value Deputy DATE Stellier & Company, CPA's Please sign and date your return, send the original to the county SIGNED appraiser's office by April 1, unsigned returns cannot be accepted William by the appraiser's office. ADDRESS 714 W 23RD S PANAMA C Notice: If you are entitled to a widow's, widower's or disability exemption on personal property (not already claimed on real estate) PHONE NO. 850-784-0340 PREPS'I.D. # P00024579

consult appraiser.

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Page 2				roperty Tax		ules (	Enter	Totals on	Page	1)					
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#### \*\* Attach This Copy to Your Tax Return

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ARC ON WELDING

COUNTY:	BAY

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Social Security Number

#### FL 405 - Tangible Personal Property Tax Schedule

LINE 13 Enter Applicable Line Number (10-24) From Page 1

DESCRIPTION OF ITEM	AGE	YEAR PURCHASED	TAXPAYER'S ESTIMATE OF FAIR MARKET WALVE	Con	AYER'S MATE OF dition Avg.Poo	INSTALLED	APPRA Condition	ISER'S USE ONLY
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MACHINERY & EQUIPMT	10	1997		1	17	27,355		
MACHINERY & EQUIPMT	9	1998			11	16,016		
MACHINERY & EQUIPMT	8	1999				8,399		
MACHINERY & EQUIPMT	6	2001				2,070		
MACHINERY & EQUIPMT	5	2002				360		
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