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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000088286 (4)

U.S. WELDING & SAFETY SUPPLY CO.

| Principal Place of Business Mailing Address | | | | | -{ | |
|--|--|---------------------|-------------------------|--------------|--|---|
| | 2ND TERRACE | | 13226 S.W. 62ND TERRACE | | | |
| MIAMI FL 331 | 183 | MIAMI FL 33183 | | | | DO NOT WRITE IN THIS SPACE |
| | | | | | | 3. Date Incorporated or Qualified |
| | | | | | | 10/13/1997 |
| 2. Principal f | Place of Business | 2a. Mailing A | 2a. Mailing Address | | | 4. FEI Number , Applied For |
| 1 | | 26 | 26 | | | 65-0789089 Not Applicable |
| Sulte, Apt. #, etc. | | Suite, Apt | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired S8.75 Additional |
| 2 | | 27 | | | | Fee Required |
| City & State | | h ·ı | City & State | | | 6. Election Campaign Financing \$5.00 May Be |
| 3 | | 28 | | | | Trust Fund Contribution Added to Fees |
| Zip | Country | Z(p | _ | Country | / | 8. This corporation owes or has paid the current year Intangible |
| 4 | 25 9. Name and Address of Curr | 29 | 30 | ¥ | | Personal Property Tax due June 30. X Yes No 10. Name and Address of New Registered Agent |
| | | rent negistered Age | | 81 | Name | 10. Name and Address of New Registered Agent |
| | REDONDO, JOSE | | | " | Harit | |
| 13226 S.W. 62ND TERRACE | | | | 82 | Street Address (P.O. Box Number is Not Acceptable) | |
| Mi | AMI FL 33183 | | | | | |
| | | | | 83 | | |
| | | | | 84 | City | FL 85 Zip Code |
| SIGNATURE | Signature, typical or prevend name of legistimed | - | | | | tion's board of directors. I hereby accept the appointment as registered Pod when reinstating) DATE |
| 12. | | AND DIRECTORS | (Non-in- | 13. | citt signature requi | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE | President | | DELETE | 1.1 30TLE | | Change Additio |
| NAME | Tree Appenion | | | 1.2 NAME | | |
| NAME STREET ADDRESS 13236 S.W 62 TERR CITY-ST-ZIP MIG FL 33183 | | | | 1.3 STREET | ADDRESS | |
| CITY-ST-ZIP MIG FL 33183 | | 83 | 1.4 | | S1 - ZIP | |
| TITLE | | DELETE 2.1 | | 2.1 TITLE | | Change Additio |
| NAME | 2 | | 2.2 NAME | | re•• | |
| STREET ADDRESS | | | | 2.3 STREET | ADDRESS | |
| CITY-ST-ZIP | | | | 2.4 CITY-: | ST-ZIP | |
| TITLE | | | DELETE | 3.1 TITLE | | ☐ Change ☐ Additio |
| NAME | | | | 3.2 NAME | 1 | |
| STREET ADORESS | | | | 3.3 STREET | ADDRESS | |
| CITY-ST-ZIP | | | | 3.4. CITY- | ST - ZIP | |
| TITLE | | L. | DELETE | 41 TITLE | | Change Addition |
| NAME | | | | 4. 2 NAME | f | |
| STREET ADDRESS | | | | 4.3 STREET | ADDRESS | |
| CITY-ST-ZIP | | | | 4.4 CITY - S | ST-ZIP | |

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 supplierrental 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 original 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 on any function with my address.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

DELETE

DELETE

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DU. DUOP

(30F) Z80-6777

Change

Change

Addition

Addition

FILED

May 15 1998 8:00am

Secretary of State