

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

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90031 030 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000098055

1. Corporation Name
WELDCO INVESTMENTS, INC.



Principal Place of Business 111 REED ROAD LAKE PARK FL 33403	Mailing Address 111 REED ROAD LAKE PARK FL 33403
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Jeffrey D. Palm Suite, Apt. #, etc. 22 1100 53 rd Court So. City & State 23 Mangonia Park, FL Zip Country 24 33407 25 USA		2a. Mailing Address 26 Jeffrey D. Palm Suite, Apt. #, etc. 27 1100 53 rd Court So. City & State 28 Mangonia Park, FL Zip Country 29 33407 30 USA		3. Date Incorporated or Qualified 11/17/1997	
4. FEI Number 59-3488080		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		7. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent LUPTON, WILLIAM A 1053 MANOR DRIVE PALM SPRINGS FL 33461		10. Name and Address of New Registered Agent 81 Name Palm, Jeffrey D. Palm 82 Street Address (P.O. Box Number is Not Acceptable) 1100 53 rd Court So. 83 84 City Mangonia Park FL 85 Zip Code 33407	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Jeffrey D. Palm JEFFREY D. PALM 1/4/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALM, JEFF	1.2 NAME	
STREET ADDRESS	111 REED ROAD	1.3 STREET ADDRESS	1100 53 rd Court So.
CITY-ST-ZIP	LAKE PARK FL 33403	1.4 CITY-ST-ZIP	Mangonia Park, FL 33407
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOOTH, RICHARD	2.2 NAME	
STREET ADDRESS	111 REED ROAD	2.3 STREET ADDRESS	1100 53 rd Court So.
CITY-ST-ZIP	LAKE PARK FL 33403	2.4 CITY-ST-ZIP	Mangonia Park, FL 33407
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Jeffrey D. Palm JEFFREY D. PALM 1/4/99 561-845-2245
Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/98)