

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000033446

Entity Name: GUSTAFSON WELDING, INC.

FILED
Apr 29, 2005
Secretary of State

Current Principal Place of Business:

9621 SIDNEY HAYES RD
ORLANDO, FL 32824

New Principal Place of Business:

9621 SIDNEY HAYES RD STE. A
ORLANDO, FL 32824

Current Mailing Address:

425 BECKY STREET
ORLANDO, FL 32824

New Mailing Address:

9621 SIDNEY HAYES RD. STE. A
ORLANDO, FL 32824

FEI Number: 59-3504256

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GUSTAFSON, CHARLES W JR
Address: 425 BECKY STREET
City-St-Zip: ORLANDO, FL 32824

Title: VD () Delete
Name: KUHN, BROCTON
Address: 425 BECKY STREET
City-St-Zip: ORLANDO, FL 32824

Title: STD () Delete
Name: GUSTAFSON, LISA
Address: 425 BECKY STREET
City-St-Zip: ORLANDO, FL 32824

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GUSTAFSON, CHARLES W JR
Address: 23800 READING RD.
City-St-Zip: HOWEY IN THE HILLS, FL 34737

Title: VD (X) Change () Addition
Name: KUHN, BROCTON
Address: 16525 HIGHLAND AVE.
City-St-Zip: MONTVERDE, FL 34756

Title: STD (X) Change () Addition
Name: GUSTAFSON, LISA
Address: 23800 READING RD.
City-St-Zip: HOWEY IN THE HILLS, FL 34737

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA M. GUSTAFSON

STD

04/29/2005

Electronic Signature of Signing Officer or Director

Date