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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

May 04, 1999 8:00 am Secretary of State

05-04-1999 90137 042 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000054780

1. Corporation Name

SIGNATURE:

MACHINE WELDING TECHNOLOGIES, INC.

Principal Place	or Business	Mailing Address						
2090 PALM BE	CH LAKES BOULEVARD	2090 PALM BEACH LAKES	BOULEV/	'ARD				
SUITE BOO		SUITE 800			DO NOT WOTE IN T	DO NOT WOLLE IN THIS SPACE		
WEST PALM BEACH TL 33409		WEST PALM BEACH FL 33409		DO NOT WRITE IN THIS SPACE				
		`			3. Date Incorporated or Qualifed			
					06/18/1998		P. J. F.	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		plied For	
21		580 Village Blv	/d		05-08405/9		t Applicable	
	illage Blvd.	Suite 160	u.		5. Certificate of Status Desired	\$8.75		
22 Suite		1271	al EI	22400		Fee Re		
	Palm Beach, FL 33409	West Palm Bea	cn, FL.	33409	6. Election Campaign Financing	\$5.00		
23		28			Trust Fund Contribution	Added 1	to Fees	
Zip	Country	Zip	Cour	intry	8. This corporation owes the current year	Intangible .	.	
24	25	29	30	T	Personal Property Tax.		No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Register	ad Agent		
CLIII	LINCHADITE CHARLES C ESO.		1	81 Name				
	LINGWORTH, CHARLES C ESQ.		Ì	82 S Jes	anne Odom Conway, Esq. Acceptable)		***	
	PALM BEACH LAKES BOULEVA	AMU		500	O Village Plant C. is 150			
	E 800			83 36	0 Village Blvd., Suite 160			
WES	T PALM BEACH FL 33409			84 City	est Palm Beach, FL 33409	. 85 Zip (Code	
				City	F	:L " - " `	Bodo	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statut	es, the at	bove-named o	corporation submits this statement for the purpose	of changing its	registered	
office or re	egistered agent, or both, in the State of familiar with, and accept the abligat	of Florida. Such change was a	uthorized	d by the corpo	iration's board of directors, I hereby accept the ap	pointment as re	gistered	
	·// · // //		inda Ototo	0.00	4/2	9/99	J	
SIGNATURE	Signature typed or printed name of registered agep	and title if applicable. (NOTE	: Registered	Agent signature re	equired when reinstating) DATE	(///		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
TITLE		☐ DELETE	1.1 TIT	TLE /	Polared Teleninsila	Change	Addition	
NAME			1.2 NA	AME	NORMAN J. BIRMINGHAM 10250 NW 52ND ST. CORAL SPRINGS, FL 330)	, ,	
STREET ADDRESS			13 ST	TREET ADDRESS	CORAL CREINER C. 331	コム		
				TY-ST-ZIP	-UKAZ SPATIOS, PZ DOU	10		
CITY-ST-ZIP TITLE		☐ DELETE	2.1 TIT			☐ Change	Addition	
1			2.2 NA					
NAME				AMF I		Change	-	
STREET ADDRESS						Change	•	
			2.3 ST	TREET ADDRESS		Change		
CITY-ST-ZIP		∏ nei ete	2.3 STT 2.4 CF	TREET ADDRESS			Addition	
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		☐ DELETE	2.3 STP 2.4 CF 3.1 TIT 3.2 NA	TREET ADDRESS SITY-ST-ZIP TLE AME			- Addition	
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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.