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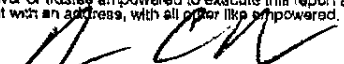
D Douglas Hill CPA

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FILED

Jul 20, 2005 08:00 AM
Secretary of State**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P98000096135		
1. Entity Name DE PADRO WELDING, INC.		
Principal Place of Business 2515 NE 5TH AVE POMPANO BEACH, FL 33064		Mailing Address 2515 NE 5TH AVE POMPANO BEACH, FL 33064
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent DEPADRO, DAVID C 2515 NE 5TH AVE POMPANO BEACH, FLORIDA 33064		4. FEI Number 05-0909257 Applied For Not Applicable
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing) DATE _____		
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE 1100000373757 07/20/05-80006-011 550.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEPADRO, DAVID C 2515 NE 5TH AVE POMPANO BEACH, FLORIDA 33064	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: 		7-11-05 954 8030213
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #