


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90175 027 ***158.75

DOCUMENT # P99000005572 1. Entity Name GLOBAL WELDING & FABRICATION SERVICE, INC.	
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Principal Place of Business 1690-A N. HERCULES AVE. CLEARWATER, FL 33765	Mailing Address 1690-A N. HERCULES AVE. CLEARWATER, FL 33765
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DO NOT WRITE IN THIS SPACE



04012004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3562977	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**ANDERSON, JOEL
1690A N. HERCULES AVENUE
CLEARWATER, FL 33765**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANDERSON, JOEL 1608 GENTRY ST. CLEARWATER, FL 33755
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec Anderson, Pamela Ryan 1608 Gentry Clearwater, FL 33755
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec Platt, Stephen 2103 Arcadia Rd Holiday, FL 34690
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tres Oewitt, Monica 1614 Windsor Place Clearwater, FL 33755
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. 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 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 607, 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:  **1 April 2004** **443-2623**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #