2001 UNIFORM BUSINESS REPORT (UBR)

May 14, 2001 8:00 am Secretary of State DOCUMENT # P99000062263 HI-TECH WELDING AND FABRICATION INC. 05-14-2001 90261 035 ***150.00 Principal Place of Business Mailing Address 1906 HI-TECH LANE 1906 HI-TECH LANE FT. WALTON BEACH FL 32547 FT. WALTON BEACH FL 32547 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number 59-2909926 Applied For Not Applicable Zip Country Zip Country **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7: Name and Address of New Registered Agent Name FOWLER, DANNY M Street Address (P.O. Box Number is Not Acceptable) 1906 HI-TECH LANE FT. WALTON BEACH FL 32547 Zip Code 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change Addition NAME FOWLER, DANNY M NAME STREET ADDRESS 1906 HI-TECH LANE STREET ADDRESS CITY-ST-ZIP FT. WALTON BEACH FL 32547 CITY-ST-ZIP ST THE Delete TITLE 10 addition HAYS, RONALD J NAME NAME STREET ADDRESS 1906 HI TECH LANE STREET ADDRESS CITY-ST-ZIP FORT WALTON BEACH FL 32547 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ "Change" ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. Thereby 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 flustee the process of execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 in Block 12

changed, or on an attachment with an charges with an other like empowered.

Danny M. Fowler 4-27-01

SIGNATURE:

Power J. Houler 4-27-01