2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # S03280

1. Entity Name
SOUTHWEST SHEETMETAL & WELDING, INC.

Principal Place of Business	Mailing Address
3455 WESTVIEW DR NAPLES, FL 34104 US	5820 12TH AVENUE SOUTH NAPLES, FL 34116 US

DO NOT WRITE IN THIS SPACE

01142004   No Chg-P   CR2E034 (10/03)

4. FEI Number		Applied For
65-0222798		Not Applicable

5. Certificate of Status Desired   ☐   **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KING, JAMES F.
5820 12TH AVE SOUTH
NAPLES, FL 33942

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 _____

Signature, typed or printed name of registered agent and title if applicable   (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.   ☐   **$5.00** May Be Added to Fees

U00000114319
04/15/04-80045-002 300.00

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	KING, JAMES F
STREET ADDRESS	5820 12TH AVE S W
CITY-ST-ZIP	NAPLES, FL

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _____   1-14-04   239-455-5775

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #