

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murphree
Secretary of State
JACKSONVILLE, FLORIDA 32203

DOCUMENT # V38527

(0)

JACKSON WELDING SERVICE, INC.

APPROVED
AND
FILED

95 MAY -1 AM 4:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

C/O GEORGE THOMPSON
6001 PINWOOD AVE
WEST PALM BEACH FL 33407

C/O GEORGE THOMPSON
6001 PINWOOD AVE
WEST PALM BEACH FL 33407

(DO NOT WRITE IN THIS SPACE)

3. Date incorporated or qualified

05/22/1992

3a. Date of Last Report

04/29/1994

4. FEI Number

65-0335912

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199 (1932
Florida Statutes)

☒ Yes

☐ No

2. Principal Place of Business

21. State, Apt. #, etc.

22. City & State

23. Zip

24. County

2a. Mailing Address

25. State, Apt. #, etc.

27. City & State

28. Zip

29. County

9. Name and Address of Current Registered Agent

THOMPSON, GEORGE
6001 PINWOOD AVE.
W. PALM BEACH FL 33407

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0508, Florida Statutes.

SIGNATURE

George Thompson

April 29, 95

12. OFFICERS AND DIRECTORS

1. TITLE	DP
2. NAME	THOMPSON, GEORGE
3. STREET ADDRESS	6001 PINWOOD AVE.
4. CITY, ST, ZIP	W. PALM BEACH FL
5. TITLE	
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS (If any)

1. TITLE	☐ Change ☐ Addition
2. NAME	
3. STREET ADDRESS	
4. CITY, ST, ZIP	
5. TITLE	☐ Change ☐ Addition
6. NAME	
7. STREET ADDRESS	
8. CITY, ST, ZIP	
9. TITLE	☐ Change ☐ Addition
10. NAME	
11. STREET ADDRESS	
12. CITY, ST, ZIP	
13. TITLE	☐ Change ☐ Addition
14. NAME	
15. STREET ADDRESS	
16. CITY, ST, ZIP	
17. TITLE	☐ Change ☐ Addition
18. NAME	
19. STREET ADDRESS	
20. CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information included on this annual report or supplemented annual report is true and correct and that my signature shall have the same legal effect as a notary public. That I am an officer or director of the corporation or the member 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 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE THOMPSON

407-833-8997