2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V42249

Entity Name: ALBIN WELDING, INC.

FILED Mar 17, 2005 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

1160 NW 100 ST. 2601 N. W.115ST MIAMI, FL 33150 R416

MIAMI, FL 33167

Current Mailing Address: New Mailing Address:

1160 NW 100 ST 2601 N.W. 115ST MIAMI, FL 33150 B416 MIAMI, FL 33167

FEI Number: 65-0345270 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PRATER, LINDA M PRATER, LINDA M 11600 W. GOLF DR. #C414 2601 N.W. 115ST MIAMI, FL 33147 B416 MIAMI, FL 33167 US

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: LINDA M. PRATER

03/17/2005 Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition Title: () Delete Title: LOBAINA, ALBIN LOBAINA, ALBIN Name: Name: 1160 NW 100 ST. 2601 N.W. 115ST B416 Address: Address: City-St-Zip: MIAMI, FL 33150 City-St-Zip: MIAMI, FL 33167

() Delete Title: Title: (X) Change () Addition

LORIE, NOELIA Name: Name: LORIE. NOELIA 11600 W. GOLF DR. #C414 Address: 2601 N.W. 115ST B416 Address: MIAMI, FL 33147 MIAMI, FL 33167 City-St-Zip: City-St-Zip:

() Delete Title: (X) Change () Addition Title:

PRATER, LINDA M Name: PRATER, LINDA M Name: 1160 NW 100 ST Address: 2601 N.W. 115ST B416 Address: City-St-Zip: MIAMI, FL 33150 City-St-Zip: MIAMI, FL 33167

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: ALBIN LOBAINA 03/17/2005