2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V42249

Entity Name: ALBIN WELDING, INC

2601 N.W. 115ST B416

MIAMI, FL 33167

Address: City-St-Zip: FILED May 02, 2007 Secretary of State

Littly Nai	ile. ALDIN V	WELDING, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
2601 N. W	.115ST				
B416 MIAMI, FL	33167				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2601 N.W. B416 MIAMI, FL					
FEI Number:	65-0345270	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
	115ST 33167 US	voubmits this statement for the pu	urnaca of abanging its registered	office or registered egent or both	
	named entity of Florida.	y submits this statement for the pu	irpose of changing its registered	office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			nt	Date	
		193(2)(b), F.S., the corporation did not ng Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (LOBAINA, AL 2601 N.W. 11 MIAMI, FL 33	15ST B416	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	V (LORIE, NOEL 2601 N.W. 11 MIAMI, FL 33	I5ST B416	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	T (PRATER, LIN	() Delete DA M	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: ALBIN LOBAINA PRES 05/02/2007