SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPÖRT

1996



FLORIDA DEPARTMENT OF STATE

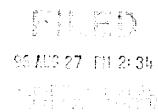
Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

(0)



DOCKSIDE DIESEL, INC.						
Principal Place of Business Mailing Address						
1915 SW 21ST AVENUE FT. LAUDERDALE FL 33312		1915 SW 21ST AVENUE		900	1 00194169 9 3/9601002002	
		FT. LAUDERDALE FL 3	FT. LAUDERDALE FL 33312		3. Date Incorporated or Qualifico 3a. Date of Last report	
US		US			09/20/1988	05/01/1995
2. Principal Place of Business		2a. Mailing Address 26	⊢ •		4. FEI Number 65-0078917	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
22		27		A. F. M. Orangina Financina	\$5.00 May Be	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	Added to Fees	
Zip Country		Z10	Zip Country		8. This corporation has liability for	r iptangible tax under s. 199.032.
24	25	29	30		Florida Statutes Yes No	
[24]	9. Name and Address of Curre				10. Name and Address of New F	Registered Agent
TAY	LOR, ALICE W.			81 Name		
2997 N. W. 68TH ST			Ì	82 Street Address (P.O. Box Number is Not Acceptable)		able)
FORT LAUDERDALE FL 33309						
			83			00 111
			ļ	84 City		FL 85 Zip Code
			1 2 2 2 2 2 2	s is semad serv	oration submits this statement for the	purpose of changing its registered
11. Pursuant to the provisions of Sections 607 0502 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 607.0505, Florida Statutes.						
SIGNATURE _	agnature, typed or printed name of registered a	root and the Lacebrahia (M.	OTF Registered	Agent signature requir	red when reinstaling)	DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TIFLE	PVTS DELETE 11		1170	TLE		Change Addition
NAME	TAYLOR, ALICE W.		1.2 NAME			
STREET ADDRESS 2997 N. W. 68TH ST.			13 STREET ADDRESS			-
CITY-ST-ZIP				IY-SI-ZIP	Change Addition	
TITLE		DELETE	2 1 TF			Change Addition
NAME			2 2 N/			
STREET ADDRESS				REET ADDRESS		
CITY-S1-ZIP			2 4 C	ITY - ST - ZIP		Change Addition
TITLE			32 N			
NAME				IREET ADDRESS		
STREET ADDRESS	s (ITY - ST - ZIP		
CITY - ST - ZIP		DELETE	4111			Change Addition
NAME			4.21	IAME		
STREET ADDRESS			435	TREET ADORESS		
CITY-ST-ZIP			44C	ITY-ST-ZIP		
TITLE		DELETE	51 T	TLE		Change Addition
NAME			5 2 N	AME		
STREET ADDRESS			5 3S	TREET ADORESS		
CITY-ST-ZIP				ITY-ST-ZIP		Change Addition
TITLE				ITLE		Grange Addition
NAME .			6 2 N			
STREET ADDRESS				THEET ADDRESS		
CITY-ST-ZIP		to durith this files is eshabadie	furnished:	ITY-ST-ZIP	alify for the exemption stated in Section	on 119 07(3)(k), Florida Statutes T
14. I do hereb	y certify that the information supp	ned with this bring is voiuntably	montal ann	and acces not que	and accurate and that my signature:	shall have the same legal effect as if

further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR