LINIFORM RUSINESS REPORT (LIRR)

FOR PROFIT CORPORATION

FILED Apr 28, 2004 8:00 am Secretary of State

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DOCUMENT #	Un3nna	つりかご	•	·		
1. Entity Name	1-020000	76275		···		
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MERCEDIESEL, INC	<u> Periodo a de la comet</u>		<u>-</u>		racina de la comunicación de la	
MERCEDIESEL, INC			Osladal		004100	<u> </u>
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2 Dringing Class of I	Duelsee	2 Mailine Address			en e	
2. Principal Place of Business 3. Mailing Address 5061 S ST RD 7 BLDG 6				• .*	A STATE OF THE STA	•
Suite, Apt. #, etc. Suite, Apt. #, etc.					DO NOT WRITE IN THIS	SPACE
606						
City & State		City & State			4. FEI Number 57-1178204	Applied For
DAVIE, FL Zip	Country	Zip	T 6	number:	3/=11.0201	Not Applicable
33314	Country	ΔIÞ		ountry	5. Certificate of Status Desired_	\$8.75 Additional Fee Required
				7 Nam	ne and Address of Current Registe	<u> </u>
				Name	ile and Address Of Current Registe	rea Agent
DO NOT WRITE				SPIEGEL-AND	OUTRERA, PA	
					ess (P.O. Box Number is Not Accep	table)
IN THIS SPACE				1840 SW 22N	U (I	
				4TH FLOOR		
				City	FL	Zip Code
8 The shove camed	entity cubmits this state	mont for the purpose	o of o	MIAMI	1	33145
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	ZA Mayor	_			RESEDENT	4-8-04
		gistered agent and title if a	onlicable	NOTE: Regist	tered Agent signature required when reinstating	DATE
January 1	May 1 Fee is \$150.00				The second secon	,
	ay 1, Fee is \$550.00			1	9. Election Campaign Financing	\$5.00 May Be
	led UBR is \$51.25 s to Florida Departmer				Trust Fund Contribution.	Added to Fees
10. 4. Jacks 180	OFFICERS AND		11.	Salatitus - salat		
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	FRANKLIN A MEYER		1 1 2 1 1 1 1 1 1	ME		
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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 nan	ne appears in Block 10	orona	an attachment wit	th an address, with all other like empower	reduced by
SIGNATURE: A PLANKUN A MEYER 4-8-04 954-444-7255						
SIGNATURE: 75 05 07 73 92 94 97 75 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #						