FILED Apr 21, 1999 8:00 am Secretary of State

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FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCU	MENT # 577268						
i. Corporation	i Name						
CADIZ D	iesel service, inc.						

Principal Place	of Business	Mailing Address	•		T JODE AN DITTE THOU I THAT I THE TABLE THE OFFICE AND THE OFFICE	TIBUL MINIS ALAZI AL	AND BEBAN COME
9699 OVERSEAS HIGHWAY 9699 OVERSEAS HIGHWAY							
MARATHON FL 33050 MARATHON FL 33050					, DO NOT MIDITE IN THIS	N 0040E	
					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualifed 06/28/1978		
2 Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Apr	plied For
21 Pilitopai Fi	ace of Eusiness	26			59-1833267	<u> </u>	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					\$8.75 A		
22					5. Certificate of Status Desired	Fee Rec	quired
City & State City & State		-		6. Election Campaign Financing	\$5.00	May Be	
23	·	28			Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	Country		8. This corporation owes the current year In		
24	25	29 3	0		Personal Property Tax.		□No
	9. Name and Address of Currer	nt Registered Agent	81	Name	10. Name and Address of New Registered	Agent	
CAD	IZ, WILLIAM J.		"	Name	·		
9699 OVERSEAS HIGHWAY			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
MARATHON FL 33050			83				
			84	City	FI	85 Zip C	ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the al				e-named co	rnoration submits this statement for the nurnose of	changing its	registered
office or re	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida, Such change was aut	horized by	the comora	tion's board of directors. I hereby accept the appo	intment as reg	jistered
	m landilar with, and accept the obliga	mons of section our coop, mont	ia Glatutes	•			j
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: R	legistered Ager	ıl signature requi	ired when reinstating) DATE		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE			1,1 TITLE	İ		Change	☐ Addition
NAME	CADIZ, WILLIAM J.		1.2 NAME				
STREET ADDRESS			1.3 STREET	TADDRESS			
CITY-ST-ZIP			1.4 CITY-S	T-ZIP		☐ Change	Addition
TITLE	0.		2.1 TITLE			[_] Criange	
NAME			2.2 NAME	1			
STREET ADDRESS	2490 HARBOR DR.			FADDRESS			
CITY-ST-ZiP	MARATHON FL	OELETE	2. 4 CITY-5	ST-ZIP	The same was a second of the same of the s	Change	Addition
TITLE			3.1 TITLE 3.2 NAME				_
NAME	2490 HARBOR DR.			TADORESS			
STREET ADDRESS	MARATHON FL		3.4. CITY-S				
CITY-ST-ZIP	·	☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAME		·		}
STREET ADDRESS			4.3 STREET	ADDRESS			ļ
CITY+ST-ZIP	0		4.4 CITY-S	1			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME	•		5.2 NAME				
STREET ADDRESS			5.3 STREE	TADDRESS			
CITY-\$T-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				1

14. 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 annual report or supplemental annual 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 name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS