2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED Mar 22, 2006 8:00 am Secretary of State

1. Entity Nam	MENT # F10883 DIESEL, INC.			03-22-2006	5 90029 01	12 ***158	.75			
Principal Place of Business 3198 NW SOUTH RIVER DR C/O JORDAN MONOCANDILOS MIAMI, FL 33142 US		Meiling Address 3163 N.W. SOUTH RIVER DRIVE C/O JORDAN MONOCANDILOS MIAMI, FL 33142								
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02102006	Chg-P	CR2E	034 (11/05)		
City & State		City & State			4. FEI Number 59-204	•		 	plied For t Applicable	
Zip Country		Zip Coun		try			; 🗆	¢0.75		
	6. Name and Address of Current	Registered Agent		Name	7. Name and	Address of Nev	Registered			
	NDILOS, JORDAN SOUTH RIVER DRIVE 33142				s (P.O. Box Numbe	er is Not Accepta	ble)		****	
Š	<i>3</i>			City			FL	Zip Cod		
signature_	named entity submits this statement for one of registered agent. Signature, typed or printed name of registered agent. E NOWI!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.	and title if applicable. (NOT	E: Registered	d Agent signature requ		th, in the State of	Florida. I am	familiar with,	and accept	
10.	OFFICERS AND		11.			CHANGES TO C	EFICERS ANI	D DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MONOCANDILOS, JORDAN 3201 NW 24TH ST RD MIAMI, FL	☐ Delete	TITLE NAME STRE	ı	ASSITIONS	OF PRICES TO C	TIOLOG ANI	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MONOCANDILOS, THEODORA 3201 NW 24TH ST RD MIAMI, FL	☐ Delete						☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DIAZ, LILIA A. 3201 NW 24TH ST RD MIAMI, FL	52 Delete	1			, <u></u>		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ISERN, JORGE E. 3201 NW 24TH ST RD MIAMI, FL	b€] Delete		E (T Chabo, Jon 3201 N.W. Miami, Flo	24th ST.		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MONOCANDIDOS, NICOLAS 3201 NW 24TH ST RD MIAMI, FL 33142	☐ Delete		E	***************************************			Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	CITY	ie Eet address (-St-Zip				☐ Change	☐ Addition	
or the cor	certify that the information supplied with on this report or supplemental report in poration or the receiver or trustee employer or on an attachment with an address	owered to execute this repon	tas reciu	red by Chapter	ned in Chapter 11! he same legal effe 607, Florida Statuti	es; and that my n	ame appears	IN BIOCK 10 0	nformation r or director r Block 11 if	

20/6