Daytime Phone #

	2 UNIFORM BUS		RT (U	BR)	FILED Jan 14, 2002 8:00 am Secretary of State	0176665 A
DIESEL N	MECHANICS CO-OP, INC.				01-14-2002 90056 002 ***150.00	<
540 N.E. 26TH COURT POMPANO BEACH FL 33064		Mailing Address 540 N.E. 26TH COURT POMPANO BEACH FL 33064 US			- 	
2. Principal	Place of Business	3. Mailing Address			- -	
Suite, Apt. #, etc. Suite, Apt. #,			rtc.		DO NOT WRITE IN THIS SPACE	
City & Sta	ite	City & State		_	4. FEI Number 59-2056566 Applied Not Appl	
Zíp	Country	Zip	Country		5. Certificate of Status Desired S8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent	Nom		7. Name and Address of New Registered Agent	
RICCI, PAT				Name		
540 N.E. 26TH COURT			Stre	Street Address (P.O. Box Number is Not Acceptable)		
POMPANO	D BEACH FL 33064	`				
·	\sim \wedge		City		FL Zip Code	
8. The above	e named entity submits this statement for	ntile purpose of changing its	registered offic	e or register	red agent, or both, in the State of Florida.	
SIGNATURE	Signature, typed or printed name or registered agent a	and the if applicable. (NOTE		 		_
9. This corp	oration is eligible to satisfy its Intangible	FILE NOW!!	: Registered Agent s		d when reinstating) DATE	
Tax filing	requirement and elects to do so. aria on back)	After May 1, 200 Make Check Payab	2 Fee will be	\$550.00	10. Election Campaign Financing \$5.00 May Trust Fund Contribution.	
11.	OFFICERS AND		12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME	P RICCI, PATRICK	☐ Delete	TITLE NAME		☐ Change ☐ A	CR2E034 (9/01)
STREET ADDRESS	2755 N.E. 28TH AVENUE, #F6		STREET ADORE	SS		25 32
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064	———	CITY-ST-ZIP			
TITLE NAME	BAUMAN, ARTHUR F	Delete	TITLE NAME	1	ΔM	. 6
	899 NAFÉ DRIVE	I	STREET ADDRE	ss 8	og Northerie Coele	7 - J
CITY-ST-ZIP TITLE	BOCA RATON FL 33487		CITY-ST-ZIP	B		ddition
NAME	BASIL, MARVIN	□ Delete ·	NAME		Change A	ddition
	540 N.E. 26TH COURT POMPANO BEACH FL 33064		STREET ADDRE	SS		
TITLE	I OMITATIO DEAOTTIE 30007	Delete	TITLE	Þ	Change DA	ddition
NAME Grand ADDRESS	,		NAME	S	teve. Phillips	
STREET ADDRESS CITY-ST-ZIP	1		STREET ADDRE	S S	teve. Phillips court onpano Book PC 330-4	
TITLE		☐ Delete	TITLE	1 5	☐ Change ☐ A	ddition
NAME STREET ADDRESS			NAME STREET ADDRE	35		
CITY-ST-ZIP			CITY-ST-ZIP	~		
TITLE		☐ Delete	TITLE		☐ Change ☐ Ac	ddition
NAME STREET ADDRESS			NAME STREET ADDRES	is		1

STREET ADDRESS

CITY-ST-ZIP 13. 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 his required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other that a powered.

CITY-ST-ZIP

SIGNATURE: 1