2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

F97000001106 DOCUMENT

1. Entity Name

MOBIL DIESEL SUPPLY CORPORATION



FILED

Mar 24, 2003 8:00 am Secretary of State

03-24-2003 91009 036 ***150.00 Principal Place of Business Mailing Address 3225 GALLOWS ROAD 900 BELL ST FAIRFAX VA 22037 STATE TAX DEPT HOUSTON TX 77002 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc ☐ CHECK HERE IF MAKING CHANGES City & State Applied For City & State 4. FEI Number 75-2689616 Not Applicable Zip Country Zip Country \$8.75 Additional Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Addition TITLE Delete TITLE MIXTER, JM NAMÉ NAME 3225 GALLOW RD STREET ADDRESS STREET ADDRESS FAIRFAX FL 22037 CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition TITLE Xxelete TITLE MAYERS, IL NAME NAME 3225 GALLOWS RD STREET ADDRESS STREET ADDRESS FAIRFAX VA 22037 CITY-ST-7IP CITY-ST-ZIP ☐ Addition XX Change TITLE ☑ Delete TITLE. DIRECTOR HINCHMAN, TM NAME NAME MUSCHALIK, J. M. STREET ADDRESS 3225 GALLOWS RD STREET ADDRESS 3225 GALLOWS ROAD CITY-ST-ZIP FAIRFAX VA 22037 CITY-ST-ZIP FAIRFAX, VA 22037 AC TITLE XX Delete TITLE ASSISTANT SECRETARY XX Change ☐ Addition LOPEZ. S A NAME KATZ, R. O. NAME 800 BELL ST STREET ADDRESS STREET ADDRESS 800 BELL ST. HOUSTON TX 77002 CITY-ST-ZIP CITY-ST-ZIP HOUSTON, TX 77002 XX Change XX Delete TITLE ■ Addition TITLE **SECRETARY** THOMASSEN, HS NAME NAME LAVERY, J. D. 3225 GALLOWS RD STREET ADDRESS STREET ADDRESS 3225 GALLOWS ROAD CITY-ST-ZIP FAIRFAX VA 22037 CITY-ST-ZIP FAIRFAX, VA 22037 TITLE Change ☐ Addition TITLE ☐ Delete WILSON, MR NAME NAME

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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

3225 GALLOW RD

FAIRFAX FL 22037

713-656-5022