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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J87248

(7)

FILED Mar 16 1998 8:00am Secretary of State

ME	tro diesel	POWER, INC.						
Principal Place of Business Mailing Address							T LORILL'S ALBU FONT NORTH TIBLE ATSALL FONT OF A	(1841 81814 81811 81811 81811 TB 81
3450 METRO PKWY PO BOX 7392 #9 FT MYES FL 33911 FORT MYERS FL 33916 US							DO NOT WRITE IN TH	IIS SPACE
							3. Date Incorporated or Qualified	
6 Print	2. Principal Place of Business 2a. Mailing Address						08/10/1987 4. FEI Number	1 14
21	Jipai Flace of bus		26. Waning Address			59-2831226	Applied For Not Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				\$8.75 Additional
22		27				6. Certificate of Status Desired	Fee Required	
City	& State	City & State	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip				Country		8. This corporation owes or has paid the current year Intangible		
24 25 29 30 9. Name and Address of Current Registered Agent					<u> </u>		Personal Property Tax due June 30. 10. Name and Address of New Registers	Yes No
						Name	10. Hame alla Abdicas di Han Hagiaton	A Agon
PICCA, FRANCESCO 3940 METRO PARKWAY #104					82	Ct A A M	draw (D.O. David, orbes is Not Assessable)	
FT MYERS FL 33916					62	Street Ad	dress (P.O. Box Number is Not Acceptable)	
					63			
					84	City		85 Zip Code
11. Pur offi	suant to the province or registered a ent. Lam familiar w	sions of Sections 607.0: gent, or both, in the Sta ith, and accept the obl	502 and 607.1508, Flor te of Florida. Such cha reations of Section 60	rida Statutes inge was aut 7 0505. Florid	, the above horized by da Statutes	e-named co the corpor	orporation submits this statement for the purpos- ation's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNAT	TURE			100001				
Signature, typed or positive name of registried agent and title if applicable (NOTE: Re						ent signature rec	quired when reinstating) OAT	
12.	D	OFFICERS A		DELETE	13. 1,1 TITLE	——————————————————————————————————————	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	PICCA. FRANCESCO			1.2 NAME	ĺ			
STREET ADDRESS 3940 METRO PARKWAY #104			04			ADDRESS		!
1	CITY-ST-ZIP FT. MYERS FL 33916				1.4 CITY-ST-2IP			
TITLE	DELETE			2.1 TITLE			Change Addition	
NAME					2.2 NAME	1		
	REET ADDRESS				2 3 STREET ADDRESS			
CITY-ST-				2 4 CITY-S 3.1 TITLE	ST-ZIP		Change Addition	
NAME					3.2 NAME			
	STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-	TY-\$T-ZIP			3.4. CITY-ST-ZIP				
TITLE	DELETE			4.1 TITLE			Change Addition	
NAME					4. 2 NAME			
STREET AD				į	4.3 STREET			į
					4.4 CITY-S 5.1 TITLE	T-21P		Change Addition
NAME	1		، سا	ACLE IL	5.2 NAME			
STREET AD	ORESS				53 STREET	ADDRESS		
CITY-ST-	1				54 CITY-S			
TITLE			·····	TELETE	61 TITLE		W-1	Change Addition

14. Thereby 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 ennual 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.

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CE FRANCESCO PICCI

3/10/98 (941) 936-5176