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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	187248
4 Composition Name	

1. Corporation	MEN # J87248	3			•		
•	DIESEL POWER, INC.						
WETTIO	DILOCK TOTTEN, 1140.					A LEGATINE REEL LEGIC LARVE KIRKL OFFICE LEGIC REEL OFFICE REEL OFFICE REEL OFFICE OFFICE OFFICE OFFICE ALLEGA	i (i
Principal Place	e of Business	Mailing	Address			T (BBITIO DIGITALIS) (401) ANDIC STORY (BUT DIGITAL DIGITALIS) ANDIC GRANT BIRIT IN	/BI
3450 METRO P	KWY	PO BOX					
#9	•		S FL 33911			CO NOT WRITE IN THE ORACE	
FORT MYERS F	FL 33916	US				DO NOT WRITE IN THIS SPACE	\neg
US						3. Date Incorporated or Qualified 08/10/1987	ļ
A Data-da-1 D	Land of Duniana	3+ Maril	ing Address			4. FEI Number Applied For	\dashv
_	lace of Business	——————————————————————————————————————	ing Address			59-2831226 Not Applicat	ole
Suite, Apt.	# etc	26 Suite	e, Apt. #, etc.			\$8.75 Additional	
22	m, 010.	27	-, · , · · · ·			5. Certificate of Status Desired Fee Required	
City & State	e		& State			6. Election Campaign Financing S5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Countr	у	This corporation owes the current year Intangible	
24	25	29	:	30		Personal Property Tax. ☐ Yes ☐ No	
	9. Name and Address of Curre	ent Registered	l Agent		41 11	10. Name and Address of New Registered Agent	\dashv
DICC	NA EDANGECO	•		8	1 Name		Ì
	CA, FRANCESCO METRO PARKWAY #104			8:	2 Street Add	dress (P.O. Box Number is Not Acceptable)	\Box
	MEINU PARKWAT #104 MYERS FL 33916			_			_
FIN	11EH2 LT 22810			8:	3		
				8-	4 City	85 Zip Code	\neg
						FL ST THE STATE OF	_
office or re	edistered agent of both in the State	E OFFIORES OF	ich change was au	Knonzea D	v ine corborai	rporation submits this statement for the purpose of changing its registere tion's board of directors. I hereby accept the appointment as registered	١ '
agent. I a	m familiar with, and accept the oblig	ations of, Sect	tion 607.0505, Flori	ida Statute	s.		
SIGNATURE			ALOTE:	Desistered As		red when reinstating) DATE	1
12.	Signature, typed or printed name of registered ag	ND DIRECTO		13.	ent signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	<u>;</u>
TITLE	р		☐ DELETE	1,1 TITLE	:	Change Add	ition
NAME	PICCA, FRANCESCO			1.2 NAME	:		1
STREET ADDRESS	3940 METRO PARKWAY #10	4		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	FT. MYERS FL 33916	•		1,4 CITY-	ST-ZIP		
TITLE	11		☐ DELETE	2.1 TITLE		☐ Change ☐ Add	ition
NAME				2.2 NAMÉ	<u> </u>		i
STREET ADDRESS				2.3 STRE	ET ADDRESS		
CITY-ST-ZIP				2.4 CfTY	-ST-ZIP		
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NAME				3.2 NAME	•		1
STREET ADDRESS				3.3 STRE	ET ADDRESS		
CITY-ST-ZIP				3.4. CITY	-ST-ZIP		
TITLE			☐ DELETE	4.1 TITLE		Change [*] Add	ition)
NAME				4. 2 NAM	E		
STREET ADDRESS				4.3 STRE	ET ADDRESS		
CITY-ST-ZIP				4,4 CITY-		Chance DAI	lition
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NAME				5.2 NAME	1		
STREET ADDRESS					ET ADDRESS		
CITY-ST-ZIP			רון מכי בדב	5.4 CITY- 6.1 TITLE		☐ Change ☐ Ado	lition
TITLE			☐ DELETE	6.2 NAME			.3011
NAME							
STREET ADDRESS				6.3 STRE	ET ADDRESS		

6.4 CITY-ST-ZIP 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.

SIGNATURE: