PROFIT CORPORATION -ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K57091

DIESEL PARTS U.S.A., INC.

FILED Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90115 028 ***150.00



Principal Place	of Business	Mailing Address			- 1005/00/10 000 BILLY YEAR TOOL OLD IT	95317 BIBN BIBN B)
		1112 S.W. 64TH AVENUE					
		MIAMI FL 33144	-		DO NOT WIDITE IN THE	COACE	
U\$		U\$			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
5 - 4 3 160		20 M-35- Address			01/10/1989		plied For
 -	ace of Business	2aMailing Address	•		· = ' · -		t Applicable
21		Suite, Apt. #, etc.	ot # etc		65-0102315	\$8.75 A	
	Suite, Apr. #, etc.				5. Certifcate of Status Desired	Fee Re	1
22 27					6. Election Campaign Financing	\$5.00	May Re
· · · · · · · · · · · · · · · · · ·		⊢ ′			Trust Fund Contribution	Added t	
Zip	Country Zip		Country		8. This corporation owes the current year In	 _	
24	25 29 30		ו ו		Personal Property Tax.		□No
	9. Name and Address of Current				10. Name and Address of New Registered	Agent	
			81	Name	•		
FRANCISCO, BONNIN			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
1112 SW 64TH AVENUE			02	Sireer Addi	1635 (1.0. Box Humber is Not Hoodpasie)		
MIAMI FL 33144			83	1			
			-	0.5		85 Zip (Code
			84	City	FI	_ 65 Zip (Code
office or re agent. I ar	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was autho	orized by	the corporation	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoint	f changing its intment as re	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	jistered Age	nt signature require	od when reinstating) DATE		
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	DP	☐ DELETE	1,1 TITLE			Change	☐ Addition
NAME.	BONNIN, CATALINA		1.2 NAME				
STREET ADDRESS	1112 S.W. 64 AVENUE		1.3 STREE	TADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-5	ST-ZIP			
TITLE	OP	☐ DELETE	2.1 TITLE			Change	Addition
NAME	FRANCISCO, BONNIN		22 NAME		المحاجون المحاج المحاج المحاج المحاج		
STREET ADDRESS	1112 SW 64TH AVE	-	2.3 STREE	TADDRESS			ì
CTTY-ST-ZIP	MIAM! FL		2.4 CITY-	ST-ZIP			
TITLE	•	☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME		·	3.2 NAME				
STREET ADDRESS			3.3 STREE	ET ADDRESS			
CITY-ST-ZIP			3.4, CITY-	ST-ZIP			- A 1655
TITLE		DELETE	4,1 TITLE			☐ Change	☐ Addition
NAME	•		4. 2 NAME		·		
STREET ADDRESS			4.3 STREE	ET ADDRESS			1
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			5 4 6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
TITLE		☐ DELETE	5.1 TITLE			Change	Addition (
NAME			5.2 NAME				
STREET ADDRESS	•			ET ADDRESS			
CITY-ST-ZIP	•	· ————————————————————————————————————	5.4 CITY-5				T A deliate
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS				ET ADDRESS	• .		
CITY-ST-ZIP			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:

305-264-1109