FILE NOW: Fee after May 1, will be \$588.75

LIMITED LIABILITY COMPANY ANNUAL REPORT .1997

FILING FEE

\$ 203.75



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ORATIONS

	FLORIDA DEPARTMEN					
44.4	Sandra B: Moi					
1.3	Secretary of S					
	DIVISION OF CORPO					

Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee

97 FEB 24 AM 11:55

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Liability Company **DOCUMENT #**496000000291 1a. Principal Place of Business Address FLORIDA PERFORMANCE DIESEL, L.C. 3874 FISCAL COURT. #200 RA74 FISCAT, COMPT

RIVIERA BEACH FL 33404							RIVIERA BEACH FL 33404			
If above	mailing address is incorre	ct in any way, line through	incorrect informati	on and enter corre	ection in Block 2s.					
2 Principal Place of Business 2a. Mailir			a. Mailing Addre	SS		3. Date Organized or Qualified 3a. State of Formation				
						_b8/06/1	996	тx		
		ite, Apt. #, etc.			4. FEI Numl			olled For		
		(City & State		70-1876		6422	□ No	Not Applicable	
Zip Countr		ntry 2	Z ip	Country	/	5. Date of L	ast Report	6. Certificate of Stat		
····								.SB 75 Additional ⊁ee fi	sdomes	
	7. Name and /	Address of Current Reg	lstered Agent		B. Name and Address of New			Registered Agent		
COLLI	NS, MTKE				Name					
3874 FISCAL COURT, #200 RIVIERA BEACH FL 33404				-	Street Address (P.O. Box Number is Not Acceptable) 300020976335 Suite, Apt. #, etc02/25/97 -01148009					
					Suite, Apt. #, el	ic.	*************************************	5/97 - 01148- 203.75 ****	203.75	
					City		FL	Zip Code		
its registe as registe	red office or registered ered agent, and accept		ite of Florida. Suc	h change was au	thorized by affirm	native vote of a ma				
10. Title	ľ	egistered Agent Accepting Appo Members/Managers	nimeni) (NO1E Hegis	, i =	required when reinstates S Street Address			, State and Zip Code	and Zin Code	
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MGRM	PHILLIPS,	MALCOLM	3874	FISCAL	COURT,	#200	RIVIERA	BEACH FL		
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]							<i>♥</i> (* .		

11. Ido 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

INHSE10 R(12-96)

SIGNATURE AND TYPED OR PRINTED HAVE OF SIGNING MANAGING MEMBER OR MANAGER

Malcola

561-844-0008

Daytime Phone #

212019-