2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE: 1

Feb 17, 2004 8:00 am Secretary of State DOCUMENT # P02000021150 1. Entity Name 02-17-2004 90038 010 ***150.00 W. W. DIESEL, INC Principal Place of Business Mailing Address 2504 B 64TH ST CT E 2504 B 64TH ST CT E **BRADENTON FL 34208 BRADENTON FL 34208** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. CR2E034 (11/03) Applied For City & State City & State 4. FEI Number 04-3602829 Not Applicable 7in Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEESE, CARL Street Address (P.O. Box Number is Not Acceptable) 2504 B 64TH ST CT E **BRADENTON FL 34208** City Zin 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) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Delete TITLE ☐ Addition WEESE CARL 2504-B 64+h ST.CT. EAST NAME WESLIE, CARL NAME 2504 B 64TH ST CT E STREET ADDRESS STREET ADDRESS BRADENTON FL. 34208 **BRADENTON FL 34408** CITY-ST-ZIP CITY-ST-ZIP **Delete** TITLE Change Addition TITLE WEESE FRANCES 2504-B 64th ST. CT. EAST WEESE, PEANERS NAME 7504 B 64TH ST CT E STREET ADDRESS STREET ADDRESS BRADENTON FL. 34208 CITY-ST-7IP **BRADENTON FL 34208** CITY-ST-7IP TITLE Delete TITLE Change ■ Addition NAME - --NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 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 or 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.

FILED