2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUBEN TOSAR, PRESIDENT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DI

Apr 12, 2007 8:00 am Secretary of State DOCUMENT # P03000105469 04-12-2007 90031 013 ***150.00 1. Entity Name ARCH DIESEL MARINE, INC. Principal Place of Business Mailing Address 19238 NW 80TH COURT 19238 NW 80TH COURT MIAMI, FL 33015 MIAMI, FL 33015 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 3714 NW SOUTH RIVER DR 3714 NW SOUTH RIVER DR Suite, Apt. #, etc. Suite, Apt. #, etc. 04022007 Chg-P CR2E034 (12/06) City & State City & State 4. FEI Number Applied For MIAMI, MIAMI, FI. FI. 20-0256876 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box 33142 33142 MIAMI-DADE MIAMI-DADE Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ABREU, MARIO 25511 SEVEN RIVERS CIR Street Address (P.O. Box Number is Not Acceptable) LAND O LAKES, FL 34639 Zip Code FI 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May 8e FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition TOSAR, RUBEN NAME NAME STREET ADDRESS 19238 NW 80TH COURT STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33015 CITY-ST-ZIP TD TITLE ☐ Delete ☐ Change ☐ Addition POL, ARIEL NAME NAME 403 NW 72ND AVENUE #117 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33126 CITY-ST-ZIP TITLE ☐ Delete 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 TITLE ☐ Delete ☐ Addition TITLE Channe NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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

4-10-07

786-402-5636

2007 FOR PROFIT CORPORATION

ATTACHMENT

ANNUAL REPORT							MIMOLIMEIN				
DOCUMENT # P03000105469											
1. Entity Name											
ARCH DIESEL MARINE, INC.											
Daire in a line			ha-W A-d			-					
Principal Plac			Mailing Address	-			1100	CILIE			
19238 NW 80TH COURT Miami, Fl 33015			19238 NW 80TH COURT MIAMI, FL 33015			1 1	もしひり 1	1964			
INDIAN, 12 33013							1 .				
2. Principal Place of Purioses, No P.C. Court											
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 3714 NW SOUTH RIVER DR 3714 NW SOUTH RIVER DR											
Suite, Apt. #, etc. Suite, Apt. #, etc.							Ch = D	CD2502474	10100		
						04022007	Chg-P	CR2E034 (1	206)		
City & State			City & State MIAMI, FL			4. FEI Numb			-	plied For	
MIAMI, FL Zip Country			Zip Country			20-025	06876			t Applicable	
33142		MIAMI-DADE	33142	1	"" AMI-DADE	5. Certificate	of Status Desired		75 Add Required		
6. Name and Address of Current Re							Address of New R		<u> </u>		
ABREU, MARIO						P.O. Box Numb	er is Not Acceptable	*)			
25511 SEVEN RIVERS CIR LAND O LAKES, FL 34639								· · · · · · · · · · · · · · · · · · ·			
	,	. 01000					÷				
			1		City	***		FL 2	Zip Codi	e	
0. The obayo		b. a. da seite this ptotoco at fa-	the average at about 1 - 10-	!	and affice as specials		th in the Ptata at Flo				
		ty submits this statement for stered agent.	the purpose of changing its	register	ea onice or register	red agent, or bo	oin, in the State of Fig	люа. таптати	ar wiin.	and accept	
SIGNATURE Signature, typed or printed name of registered agent and fille if applicable. (NOTE: Registered Age agredure required when reinstaling) DATE											
		FEE IS \$150.00	Selection Campa Trust Fund Cont			.00 May Be ed to Fees	,				
Atter M	ay 1, 200	7 Fee will be \$550.0	The state of the s	200	ง	ed 10 7 665					
10.		OFFICERS AND D	DIRECTORS (SV)		7	ADDITIONS	CHANGES TO OFF			S IN 11	
TITLE	PD TORAD I	DUBEN		D) Y	E ,				Change	Addition	
NAME STREET ADDRESS	TOSAR, I	W 80TH COURT	4) v (V	NAM SIR	eet address						
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,				-ST-ZIP						
TITLE	TD		□ Delete	TITL	E				Change	Addition	
NAME	POL, ARIEL NA				18			_	-	_	
STREET ADDRESS		72ND AVENUE #117			EET ADDRESS						
CITY-ST-ZIP	MIAMI, FI	L 33126		CITY	-ST-ZIP						
TITLE	-		Oelete	1111	!				Change	☐ Addition	
NAME STREET ADDRESS				NAM SER	eet address						
CITY-ST-ZIP					- ST - ZIP						
TITLE			☐ Delete	TITL	E				Change	Addition	
NAME				NAM	iE			_	-	_	
STREET ADDRESS					EFT ADDRESS						
CITY-ST-ZIP	<u> </u>				- ST - ZiP					F27 A	
TITLE NAME			☐ Delete	TITL NAM	!				Change	Addition	
STREET ADDRESS	J				EET ADORESS						
CITY-ST-ZIP		•			- ST - ZIP						
TITLE			☐ Delete	TITLI	E				Change	Addition	
NAME				MAK							
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS - ST- ZIP						
	Certify that th	e information supplied with t	his filing does not quality to			Lin Chanter 110	Florida Statutac I	further cortify the	at the in	formation	
indicated	on this repo	rt or supplemental report is t	rue and accurate and that n	ny signa	ture shall have the s	same legat effec	t as if made under c	ath; that I am an	officer (or director	
of the corporation of 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.											
CIONATURE DUREN MOCAR DECIDENCE											
SIGNAT	SIGNATURE: RUBEN TOSAR, PRESIDENT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Days Provide I										
										i	