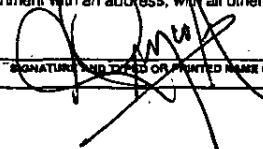


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2004 8:00 am
Secretary of State

04-19-2004 90299 024 ***150.00

DOCUMENT # P03000110960					
1. Entity Name FUEL FLEET, INC.					
Principal Place of Business 1411 NW 69TH AVE HOLLYWOOD, FL 33024			Mailing Address 1411 NW 69TH AVE HOLLYWOOD, FL 33024		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 200286680 Applied For ☐ Not Applicable ☐	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				04132004 Chg-P CR2E034 (10/03)	
6. Name and Address of Current Registered Agent OROZCO, MAYTTE V. 1411 NW 69TH AVE HOLLYWOOD, FL 33024			7. Name and Address of New Registered Agent Name ALEX A. OROZCO Street Address (P.O. Box Number is Not Acceptable) 1411 NW 69 AVE City HOLLYWOOD FL Zip Code 33024		
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. ALEX A. OROZCO SIGNATURE REGISTERED AGENT DATE 04/13/04					
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			10. Fee: NOW \$150.00 After May 1, 2004 Fee will be \$550.00		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D NAME OROZCO, MAYTTE STREET ADDRESS 1411 NW 69TH AVE CITY-ST-ZIP HOLLYWOOD, FL 33024	☒ Delete		TITLE PO NAME ALEX A. OROZCO STREET ADDRESS 1411 NW 69TH AVE CITY-ST-ZIP HOLLYWOOD FL 33024	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE VP NAME MAYTTE V. OROZCO STREET ADDRESS 1411 NW 69TH AVE CITY-ST-ZIP HOLLYWOOD FL 33024	☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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. ALEX A. OROZCO					
SIGNATURE: 			PRESIDENT 04/13/04 (754-224-9320)		