2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000054215

Entity Name: DIESEL EQUIPMENT SERVICES, CORP.

FILED Jul 26, 2007 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1367 SEA GRAPE CIR 9090 NW SOUTH RIVER DRIVE

WESTON, FL 33326 SUITE 4

MEDLEY, FL 33166

Current Mailing Address: New Mailing Address:

1367 SEA GRAPE CIR 9090 NW SOUTH RIVER DRIVE

WESTON, FL 33326 SUITE 4

MEDLEY, FL 33166

FEI Number: 26-0596355 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FERNANDEZ, MARIA D FLORIDA TRUST INSURANCE AGENCY INC 1367 SEA GRAPE CIR 9090 NW SOUTH RIVER DRIVE

WESTON, FL 33326 US SUITE 4

MEDLEY, FL 33166 US

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.

SIGNATURE: DIOMARI DIAZ 07/26/2007

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition

Name:LOPEZ, EDUARDOName:LOPEZ, EDUARDOAddress:4066 WEST 8TH CTAddress:9090 NW SOUTH RIVER DRIVE SUITE 4

City-St-Zip: HIALEAH, FL 33012 City-St-Zip: MEDLEY, FL 33166

Title: SD () Delete Title: VP (X) Change () Addition

Name: FERNANDEZ, MARIA D Name: DIAZ, DIOMARI

Address: 1367 SEA GRAPE CIR Address: 9090 NW SOUTH RIVER DRIVE SUITE 4

City-St-Zip: WESTON, FL 33326 City-St-Zip: MEDLEY, FL 33166

 Name:
 CRUZ, MIGUEL A
 Name:

 Address:
 212 OCEAN AVENUE APT. 1
 Address:

 City-St-Zip:
 JERSEY CITY, NJ 07305
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DIOMARI DIAZ VP 07/26/2007