

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000000295

1. Entity Name

DIESEL TECH OF THE TREASURE COAST, INC

FILED
Jan 12, 2001 8:00 am
Secretary of State

01-12-2001 90019 022 ***158.75

Principal Place of Business

20855 NE 16TH AV
STE C-30
NORTH MIAMI BEACH FL 33179
US

Mailing Address

4420 HARRISON ST
HOLLYWOOD FL 33021-2001
US



2. Principal Place of Business

3. Mailing Address

20855 NE 16TH AV

Suite, Apt. #, etc.

Suite, Apt. #, etc.

STE C-30

City & State

City & State

N MIAMI BCH FL

Zip

Country

Zip

Country

33179

US

4. FEI Number

65-0383062

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PIREZ, ALBERT J

4420 HARRISON STREET
HOLLYWOOD FL 33021

Name

Street Address (P.O. Box Number is Not Acceptable)

20855 NE 16 AVE
STE C-30

City

N MIAMI BCH FL

Zip Code

33179

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.
(See criteria on back)

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10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

☐

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PDCM
NAME PIREZ, ALBERT J
STREET ADDRESS 4420 HARRISON ST
CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Delete

TITLE PDCM
NAME PIREZ, ALBERT J
STREET ADDRESS 20855 NE 16 AV, C-30
CITY-ST-ZIP NORTH MIAMI BEACH, FL 33179 ☒ Change ☐ Addition

TITLE VSTD
NAME PIREZ, MICKEY C
STREET ADDRESS 4420 HARRISON ST
CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Delete

TITLE VSTD
NAME PIREZ, MICKEY C
STREET ADDRESS 20855 NE 16 AV, C-30
CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 ☒ 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

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Mickey Pirez MICKEY PIREZ VSTD 1/8/01