FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000081300

ON THE SPOT DIESEL REPAIR, INC.

Principal Plac	e of Business	Mailing Address				_			4,5, 1,255	
5322 NW 53RD ST.		5322 NW 53RD ST.								
COCONUT CREEK-FL 33073		COCONUT CREEK FL 33073					DO NOT W	RITE IN THIS	SPACE	
							3. Date Incorporated or Qualif		OI MOL	
							11/19/1993			
2. Principal R	Place of Business	2a. Mailing Address					4. FEI Number		App	lied For
41		26					65-0461423		Not	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.						\$8.75 A	dditional	
2		27				5. Certifcate of Status Desired		Fee Req	uired	
City & State		City & State			6. Election Campaign Financir	9 🗆	\$5.00 N	May Be		
23		28			Trust Fund Contribution	" ⁹ 🖸	Added to			
Zip Country		Zip Countr			try		8. This corporation owes the current year Intangible			
4 25		29 30		30			Personal Property Tax. Yes No			
	9. Name and Address of Curren	t Registered A	gent				10. Name and Address of Ne	w Registered	Agent	
	OUT OBJETON			ļ	81	Name				- 1
	OUZA, CRAFTON			<u> </u>	82	Street Add	ress (P.O. Box Number is Not Acce	ptable)		
5322 NW 53RD ST.				ľ					·	
COC	CONUT CREEK FL 33073			Ţ	83	_				
				- -	84	City			85 Zip C	ode
				[City			FL	,	
office or r	to the provisions of Sections 607.050; registered agent, or both, in the State of am familiar with, and accept the obligat	of Florida. Such tions of, Section	change was at 607,0505, Flor	uthorized ida Statul	by t	ine corporati	on's board of directors. I hereby ad	cept the appoi	ntment as reg	istered
origination of printed manual and a separate and a					tgent	t signature requir	ed when reinstating) ADDITIONS/CHANGES TO		IN DIRECTOR	2S IN 12
TITLE	DP OFFICERS AN	DURECTORS	DELETE	13.		$\overline{}$	ADDITIONS/CHANGES TO	OF FICENCY AIN	Change	Addition
	DESOUZA, CRAFTON				1.2 NAME				_ •	_
NAME	FOOD ARM FOOD OT					ADDDCCC				
STREET ADDRESS	COCONUT CREEK FL 33073			1.3 STREET ADDRESS					ſ	
CITY-ST-ZIP				1.4 CITY-ST-ZIP				Change	Addition	
TITLE	DS		Deceie	2.2 NAME						
NAME	DESOUZA, JEAN					ADDOCTOR				
STREET ADDRESS	5322 NW 53RD ST.		I.		ADDRESS		٠	<u>.</u>		
CITY-ST-ZIP	COCONUT CREEK FL 33073			2. 4 CITY+ST-ZIP 3.1 TITLE				☐ Change	Addition	
TITLE		-	DELETE	8		}			· · · · · ·	_
NAME				3.2 NAME						
STREET ADDRESS						ADDRESS				l
CITY+ST-ZIP	<u> </u>			3.4. CIT	V. 97	T-ZIP				
TITLE			CONFLETE	4.4 *1*1	_	- 1			Change	i (Addition (
NAME	i i		DELETE	4.1 TITL	E	[☐ Change	☐ Addition {
			DELETE	4. 2 NA	E ME		· ·		Change	∐ Addition (
STREET ADDRESS			DELETE	4. 2 NA 4.3 STF	E ME REET	ADDRESS			☐ Change	∐ Addition (
CITY-ST-ZIP				4. 2 NA 4.3 STF 4.4 CIT	E ME REET Y-ST					
STREET ADDRESS CITY-ST-ZIP TITLE			□ DELETE	4. 2 NA 4.3 STF 4.4 CIT 5.1 TITL	E ME REET Y-ST				Change	☐ Addition
CITY-ST-ZIP				4. 2 NA 4.3 STF 4.4 CIT 5.1 TITU 5.2 NA	E ME REET Y-ST E	r-ZIP				
C/TY-ST-ZIP TITLE NAME				4. 2 NA 4.3 STF 4.4 CIT 5.1 TITU 5.2 NA 5.3 STF	E ME REET Y-ST E ME	ADDRESS				
CITY-ST-ZIP TITLE			DELETE	4. 2 NA/ 4.3 STF 4.4 CIT 5.1 TITU 5.2 NA/ 5.3 STF 5.4 CIT	E ME REET Y-ST E ME REET Y-ST	ADDRESS			Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS				4. 2 NA/ 4.3 STF 4.4 CIT 5.1 TITU 5.2 NA/ 5.3 STF 5.4 CIT 6.1 TITU	E ME REET Y-ST E ME Y-ST E Y-ST E F E F E F E F E F E F E F E F E E	ADDRESS				
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			DELETE	4. 2 NA/ 4.3 STF 4.4 CIT 5.1 TITL 5.2 NA/ 5.3 STF 5.4 CIT 6.1 TITL 6.2 NA/	E REET Y-ST E REET Y-ST E	ADDRESS			Change	☐ Addition

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIE ASS BACK SCLID VI

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90231 050 ***150.00