2001 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 30, 2001 8:00 am Secretary of State DOCUMENT # **P93000083392** DIESEL-DO-IT, INC. 04-30-2001 90428 032 ***150.00 Principal Place of Business Mailing Address 2425 HARDIN BLVD 2425 HARDIN BLVD 134 LAKELAND FL 33803 LAKELAND FL 33803 2. Principal Piace of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3213983 Not Applicable Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MULLINS, KERMIT R Street Address (P.O. Box Number is Not Acceptable) 2425 HARDIN BLVD LAKELAND FL 33803 City Zin Code 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. TITLE ☐ Delete TITLE Addition NAME MULLINS, KERMIT R 2425 HARDEN BLUD. # 134 STREET ADDRESS STREET ADDRESS 5811 HOLLY HOCK DRIVE LAKECAND, FL 33803 CITY-ST-7IP CITY ST-ZIP LAKELAND FL 33813 TITLE Change Addition TITLE Delete NAME MULLINS, CHRISTINE M MAME SIREET ADDRESS STREET ADORESS 5811 HOLLY HOCK DRIVE CITY-ST-ZIP CiTY ST-ZIP LAKELAND FL 33813 TITLE Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME: NAME. STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiF

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 eath; 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.

STREET ADDRESS

CITY-ST-ZiP

0318 NAME

☐ Delete

TITLE

NAME

STREET ADDRESS

KERNIT P. MULLINS PRES. 4/13/01

405-7557

Change

Addition