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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000023213 (9)

DIESEL COMPONENTS (U.S.A.), INC.

Principal Place of Business 2908 SW 27TH AVE MIAMI FL 33133 Mailing Address

2908 SW 27TH AVE MIAMI FL 33133

## FILED Jan 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

-								[:	3. Date Incorporated or Qualified					
<u> </u>									03/22/1994				<u>.</u>	
2. Principal Place of Business			2a. Mailir	2a. Mailing Address			- -		4. FEI Number		Applied For			
21			26	26					65-0480859			No	t Applicable	
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.					5. Certificate of Status Desired				Additional		
22		27				<b>v.</b>		5. Certificate of Status Desired	<u> </u>	F	ee Re	quired		
City & State	e		City 8	City & State			6. Election Campaign Financing			\$5.00 May Be				
23		28				-		Trust Fund Contribution		A	ided t	o Fees		
Zip		Country	Zip		ç	untry	/	8	8. This corporation owes or has paid	the cun	ent ye	ar Int	angible	
24 25 29 30							Personal Property Tax due June 30. 🔲 Yes 🔲 No							
	g. Name	and Address of Currer	t Registered	Agent	10. Name and Address of New Registered Agent									
FERNANDEZ, ROGER B							81 Name							
2908 SW 27TH AVE							82 Street Address (P.O. Box Number is Not Acceptable)							
MIAMI FL 33133							On Oct Address It .O. Dox Manifest to 1904 Addepted [5]							
						83								
							O't-				11	- ·		
1						84	City			FL	85	Zip (	ode	
11. Pursuant	to the provis	ions of Sections 607,050	2 and 607,150	8, Florida Statu	tes, thè a	above	e-named	corporati	tion submits this statement for the pu		chanc	ilna it:	registered	
office or r	egistered ag m familiar wi	ent, or both, in the State	of Florida, Suc	th change was	authoriza	ed by	y the corp	ooration's	s board of directors. I hereby accept	the appo	ointme	nt as	registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.														
SIGNATURE	Signature, typed	or printed name of registered age	nt and little if applica	ble (NO)	TE. Register	ed Ace	ent signature	required wh	nen reinstating)	DATE				
12.		OFFICERS AN			13.				ADDITIONS/CHANGES TO OFFICE		DIRE	CTOR	S IN 12	
TITLE	D			DELETE	1.1 7	ITLE		· · ·			Ch		Addition	
NAME	FERNANDEZ, ROGER B 1.2 N					IAME						-		
0000 0144 07714 4445							ADDRESS							
CITY-ST-ZIP	MANUEL COACO							-					ļ	
TITLE	MIAMI FL 33133   1.4 CT						ot-zir	-			☐ Ch	anne	☐ Addition	
NAME	DEDET MADIA						2 NAME			ango				
STREET ADDRESS	the Allahar Barrier Advisors						ADDRESS						1	
1 - 1	AAFA BI EN													
CITY-ST-ZIP TITLE	MIAMI FL   2.4 CI   DELETE   3.1 TIT						S1-ZIP				Ch		Addition	
i												inge	Addition	
NAME	3.2 N													
! !	1						ADDRESS							
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TITLE				mercie	4.1 T						Cha	ınge	L. Addition	
NAME						YAME								
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NAME					5.2 A	AME							ļ	
STREET ADDRESS					5.3 S	TREET	ADDRESS							
CITY-ST-ZIP					5.4 0	ITY-S	T-ZIP							
TITLE				■ DELETE	6.1 T	ITLE					Cha	nge	Addition	
NAME					6.2 N	AME								
STREET ADDRESS					6.3 S	TREET	ADDRESS						Ì	
CITY-ST-ZIP					6.4 0	ITY-\$	T-ZIP							
	ertify that the	e information supplied w	th this tiling do	es not qualify fo				d in Sect	tion 119 07(3)(i) Florida Statutes I fu	rthor oor	tify, the	t that	plarmation	

14. I Refer certify that the information supplied with this filling does not quality 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.

CICALATUDE.

MELURE REQUIRED LOWS

1.40

(205) 442-4036