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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000097001 (8)

A-1 DIESEL SERVICES, INC.

Principal	Place	of	Business

Mailing Address

1743 FLINT DRIVE AUBURNDALS EL 33823 1743 FLINT DRIVE AUBURNDALE FL-33823-9678

FILED May 14 1997 8:00am Secretary of State



				l l			
				3. Date Incorporated or Qualified 3a. Date of Last Report 01/01/1996			
	Place of Business	2a. Mailing Address		4. FET Number Applied Fo			
	58 Hwy 273	26 SAME		59-3352173 Not Applica			
Sulte, Apt	E WAIES, FL	Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required			
City & Sta	te	Cily & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip 24 338	353 POLK	Zір 29 — 3	Country 30	8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No			
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered Agent			
1743	(VILLE, CLARENCE H 3 FLINT DRIVE BURNDALE FL 33823		81 Name 82 Street 63	SAME Address (P.O. Box Number is Not Acceptable) 35 Sumshim DL			
11. Pursuant office or agent. Its				Rewales FL 85 Zip Code 2885 corporation's board of directors. I hereby accept the appointment as registers			
40	Signature, typed of primed name of registered age			required when reinstating) DATE			
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Add			
TITLE	MAYVILLE, CLARENCE H	- uttrit	11 THLE	MANJINE, CHARENCE H			
NAME	4748 PLINT DRIVE		1 2 NAME	435 SUNSHINE DR.			
STREET ADDRESS	AUBURNDALE FL 39823		13 STREET ADDRESS	435 SUNSTITUTE - 120003			
CITY-ST-ZIP	0	DELETE	14 CITY-ST-ZIP	LAKE WAIES, RL 33853			
TITLE	MAYVILLE, ELIZABETH A	□ DELETE	2 1 1FILE	MAYUITLE CLIZABETH A Change Add			
NAME	1743 FUNT DRIVE		2.2 NAME	Mar conshipt DR			
STREET ADDRESS	AUBURNDALE FL 33823		2.3 STREET ADDRESS	Lake and the second			
CITY-ST-ZIP	-HODUNIONEE IL 03020	T pro est	2. 4 CITY - ST - ZIP	MAKE WHIES, FL 33853			
TITLE	1	☐ DELETE	3 1 TITLE	Change Add			
NAME	1		3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP		1 25.55	3.4. CITY - ST - ZIP				
TITLE		☐ DELETE	4.1 TITLE	Change Add			
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP		······	4.4 CITY-ST-7IP				
TITLE		☐ DELETE	5.1 TITLE	Change Add			
NAME	}		5.2 NAME				
STREET ADDRESS	1		5.3 STREET ADDRESS				
CITY-ST-ZIP	<u> </u>		5.4 CITY - \$1 - 2IP				
TITLE		DELETE	6.1 101.6	Change Add			
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP	1		6.4 CHY-S1-ZIP				
44 1 4 1 4		T. 50 41.1 20.	■ 0.4 0.11 - 91, FIL	L			

4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. 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.

CHATURE. POSICIONAL HONDILLAND HELIZABETH MANVILLE OR APROT