FILED

(941) 332-2515

2001 UNIFORM BUSINESS REPORT (UBR)

Jan 22, 2001 8:00 am DOCUMENT # P95000097892 Secretary of State MATTOS MARINE DIESEL SERVICE, INC. 01-22-2001 90130 007 ***150.00 Principal Place of Business Mailing Address 3450 METRO PKWY #B 3450 METRO PKWY #B FORT MYERS FL 33916 FORT MYERS FL 33916 C0007490 2. Principal Place of Business 3. Mailing Address 3450 METKO PKWY, UNIT#1 3450 METRO PKWY Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE UNIT #11 FORT MYERS City & State Applied For City & State 4. FEI Number 65-0629591 Not Applicable Zip 339/L \$8.75 Additional 5. Certificate of Status Desired 339/6 LEE LEE 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HUGH GREEN, HUGH J Street Address (P.O. Box Number is Not Acceptable) 3450 METRO PKWY 3450 METRO PKWY #B FORT MYERS FL 33916 UNIT #11 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) 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. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) TITLE ☐ Delete TITLE GREEN, HUGH J. GREEN, HUGH J NAME NAME 3450 METRO PKWY, #11 STREET ADDRESS 3450 METRO PKWY #B STREET ADDRESS FORT MYERS, FL 33916 CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL 33916 Change TITLE ☐ Delete TITLE GREEN, HUGH J. GREEN, HUGH J NAME NAME 3450 METRO PRWY, # 11 3450 METRO PKWY #B STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL 33916 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.