

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000021510

1. Entity Name

MARINE & INDUSTRIAL DIESEL, INC.

Principal Place of Business

Mailing Address

7121 NW 24TH COURT
SUNRISE FL 33313

7121 NW 24TH COURT
SUNRISE FL 33313-2029

2. Principal Place of Business

2800 SW 4th Ave

3. Mailing Address

2800 SW 4th Ave

Suite, Apt. #, etc.

Unit 8

Suite, Apt. #, etc.

Unit 8

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

Zip

33315

Country

USA

Zip

33315

Country

USA

4. FEI Number

65-0648931

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BURKE, JEFORY E
2800 NW 24 CT.
SUNRISE FL 33315

Name

Burke, Jefory E

Street Address (P.O. Box Number is Not Acceptable)

2800 SW 4th Ave

Unit 8

City

Ft. Lauderdale

FL

Zip Code

33315

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.

Jefory Burke

(NOTE: Registered Agent signature required when reinstating)

April 28, 2000

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)



FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD
NAME BURKE, JEFORY E
STREET ADDRESS 7121 NW 24TH COURT
CITY-ST-ZIP SUNRISE FL 33313



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



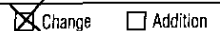
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP



TITLE PTD
NAME Burke, Jefory E
STREET ADDRESS 2800 SW 4th Ave Unit 8
CITY-ST-ZIP Ft. Lauderdale, FL 33315



TITLE
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CITY-ST-ZIP



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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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 28, 2000 764-4770

Date

Daytime Phone #

CR2E034 (9/99)