2008 FOR PROFIT CORPORATION

FILED Jul 29, 2008 8:00 am Secretary of State

ANNUAL REPORT

DOCUMENT # P97000101948 07-29-2008 90009 024 ***150.00 MIDWEST GEAR AND DIESEL CO. 40114133 Principal Place of Business Mailing Address 2307 DOUGLAS RD., #400 2307 DOUGLAS RD., #400 MIAMI, FL 33145 MIAMI, FL 33145 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 3785 NW 07252008 CR2E034 (12/06) 4. FEI Number Applied For City & State 65-0802863 Not Applicable Country \$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 OVIES, IOA C Street Address (P.O. Box Number is Not Acceptable) 2307 DOUGLAS ROAD 400 MIAMI, FL 33145 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. I am familiar with, and accept the obligations of registered ager (NOTE: Registered Agent signature required when recostation) 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 12, 2008 Added to Fees corporation did not receive the prior notice. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PST πιε ☐ Delete TITLE Change ☐ Addition ROZENTZVAIG, CLAUDIO NAME NAME STREET ADDRESS 6188 NW 7TH AVENUE STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166 CITY-ST-ZIP VPD THEE ☐ Delete TITLE ☐ Change ■ Addition ALQUIZAR, YAMIL NAME NAME STREET ADDRESS 6188 NW 74TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33166 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-ZIP Defete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BILE ☐ Delete HILE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental poor 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 typical empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a address, with all other like empowered. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone: #