

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 13, 2001 8:00 am
Secretary of State
 08-13-2001 90145 005 ***150.00

DOCUMENT # **P98000017792**

1. Entity Name
Michael's Diesel Service Inc.

Principal Place of Business Mailing Address
5079 W Beaver St.
Jacksonville, FL 32254

2. Principal Place of Business 3. Mailing Address
SAA SAA

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-3496962** Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

David G. Thomas
5079 W Beaver St
Jax, FL 32254

7. Name and Address of New Registered Agent

Name **Molly L Colaiatz**
 Street Address (P.O. Box Number is Not Acceptable) **11019 Duval Rd**
 City **Jax** FL Zip Code **32218**

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 **Molly L Colaiatz**
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

8/3/01
 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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE **Vice President** ☒ Delete
 NAME **David G. Thomas**
 STREET ADDRESS **5079 W. Beaver St.**
 CITY-ST-ZIP **Jax, FL 32254**

TITLE **Secretary** ☒ Delete
 NAME **David G. Thomas**
 STREET ADDRESS **5079 W. Beaver St**
 CITY-ST-ZIP **Jax, FL 32254**

TITLE **Jax, FL 32254** ☒ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☒ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Vice President** ☐ Change ☒ Addition
 NAME **Michael E Webber**
 STREET ADDRESS **5079 W Beaver St**
 CITY-ST-ZIP **Jax, FL 32254**

TITLE **Secretary** ☐ Change ☒ Addition
 NAME **Michael E Webber**
 STREET ADDRESS **5079 W. Beaver St**
 CITY-ST-ZIP **Jax, FL 32254**

TITLE ☐ Change ☐ Addition
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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: **Michael E Webber**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-3-01 904-378-0444
 Date Daytime Phone #

CR2E034 (5/01)