8/12/03 (337)433-6311

SIGNATURE: **人**

20 UN	003 FOR PROFI	T CORPOR SS REPOR	ATION T (UBR)		FIL Aug 18, 20	ED 03 8:00 am of State	0034670
1. Entity Nam	ne	0037042			08-18-2003 9016		8
GLOBAL	DIESEL SERVICES INC.		A CONTIN				
Principal Place of Business Mailing Address 1999 WEST-MONAB ROAD 1999 WEST-MCNAB-ROAD					90150790		
POMPANO BE	EACH FL 30009	POMPANO BEACH FL 330	69				
<u> 25// N.</u>			hLone Day	بغث) 86/86 (11)) (889) 86/11 \$/8/0 1191 (56 /	
Suite, Apt.	#, etc. V 5	Suite, Apt. #, etc.	,		CHECK HERE IF MA	KING CHANGES	_
City & Stat	Apono Boach FL	City & State/	Beach FL	4.	FEI Number 62-174 1923	Applied For Not Applicable	
Zip	064 Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Additional	1
330	6. Name and Address of Current R	33064 egistered Agent		7.	Name and Address of New Registe	Fee Required ered Agent	
C T COD	PODATION CYCTEM		Name	_			}
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD			Street Addre	ss (P.O. I	Box Number is Not Acceptable)]
	ION FL 33324						1
			City			FL Zip Code	7
	gamed entity submits this statement for tions of registered agent.	the purpose of changing its	registered office or reg	istered a	gent, or both, in the State of Florida.	I am familiar with, and accept	1
SIGNATURE :	Signature, typed or printed name of registered agent an	nt title i/sholicable //NOTE	: Registered Agent signature rec	uired when	reinstating	DATE	/
F	ILE NOW!!! FEE IS \$550.00	, montespiedos.	, riegistolog rigotik orginatatio tec				۲ ا
After Se	ptember 10, 2003 Fee will be \$750.0 k Payable to Florida Department of S				9. Election Campaign Financin Trust Fund Contribution.	g \$5.00 May Be Added to Fees	
10. TITLE	OFFICERS AND D		11.	A	DDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 11 Change Addition	ි ල
NAME STREET ADDRESS CITY-ST-ZIP	COOLING, ARTHUR R 5400 HIGHWAY 90 EAST LAKE CHARLES LA 70601	□ Celete	NAME STREET ADDRESS CITY-ST-ZIP			Change Addition	CR2E034 (4/03)
TITLE	\ .	☐ Delete	TITLE			☐ Change ☐ Addition	S
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP				
TITLE		☐ Delete	TITLE			☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME	- V 1/2	, Delete	TITLE NAME			☐ Change ☐ Addition]
STREET ADDRESS CITY-ST-ZIP	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		STREET ADDRESS CITY-ST-ZIP				
TITLE NAMÉ	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	☐ Delete	TITLE :		\	☐ Change ☐ Addition	
STREET ADDRESS		•	STREET ADDRESS CITY-ST-ZIP		\		
TITLE	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	☐ Delete	TITLE			☐ Change ☐ Addition	1
NAME STREET ADDRESS	in the second se		STREET ADDRESS			\ .	
CITY-ST-ZIP		<u> </u>	CITY-ST-ZIP		the second secon	<u>\</u>	
12. I hereby of indicated of the cor	certify that the information supplied with till I on this report or supplemental report is to poration or the receiver or trustee empow	his filing does not qualify for rue and accurate and that m rered to execute this report a	the exemption stated in any signature shall have the required by Chapter	n Section the same 607, Flor	119.07(3)(i), Florida Statutes. furth legal effect as if made under oath; t rida Statutes; and that my name app	er certify that the information hat I am an officer or director ears in Block 10 or Block 11 if	