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PROFIT CORPORATION ANNUAL REPORT 1998 DOCUMENT # 830239

FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(0)

C.A. MUER CORPORATION

FILED Mar 25 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 1548 PORTER STREET 1548 PORTER STREET **DETROIT MI 48216** DETROIT MI 48216 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/11/1973 2a. Mailing Address 26 460 GAUERIA OFFICENTRE 2. Principal Place of Business 4. FEI Number Applied For 21 400 GALLERIA DEFICENTRE 38-1752352 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required Southaeld. City & State 6. Election Campaign Financing \$5.00 May Be SOUTHFIELD, MI. Trust Fund Contribution Added to Fees Country Country 45A This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 48086- SIIL 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name CANNON, JOHN V. III 1550 RINGLING BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) P.O.BOX 3258 SARASOTA FL 33578 83 84 City Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change TITLE 1.1 TITLE DIRECTOR - ONLY BEIL, LEO NAME 1.2 NAME 21 BEACON HILL STREET ADDRESS 1.3 STREET ADDRESS **GROSSE POINTE MI** CITY - ST- ZIP 1.4 CITY-ST-ZIP **Change** DELETE Addition SECRETARY - ONLY TITLE 2.1 TITLE TABACK, GARY NAME 2.2 NAME 2000 TOWN CENTER STE 900 STREET ADDRESS 2.3 STREET ADDRESS SOUTHFIELD MI 2. 4 CITY - ST- ZIP CITY-ST-ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE MUER, SUSAN NAME 3.2 NAME 30040 JEFFERSON STREET ADDRESS 3.3 STREET ADDRESS ST CLAIR SHORES MI CITY-ST-ZIP 3.4. CITY - ST - ZIP Change Addition TITLE DELETE 4.1 TITLE PRESIDENT ONLY ZINGLE, ROGER NAME 4. 2 NAME 6937 CROSSWELL DR STREET ADDRESS 4.3 STREET ADDRESS **BLOOMFIELD MI** CITY-ST-ZIP 4.4 City-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE RUDZINSKI, KAREN M. NAME 5.2 NAME 25603 SULLIVAN LANE STREET ADDRESS 5.3 STREET ADDRESS NOVI MI CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE MUER, CHARLES A JR 6.2 NAME 25895 CHIPPENDALE CT #D STREET AODRESS 6.3 STREET ADDRESS ROSEVILLE MI 6.4 CITY-ST-ZIP CITY-ST-7IP

14. Thereby 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 annual report or supplied annual 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 12 or Block 13 if changes or or or in attaching with an address. GREG OCHOR

SIGNATURE:

VICE PRESIDENT

372-2100

Sheet1

C. A. MUER CORPORATION SUPPLEMENTAL TO THE FLORIDA ANNUAL REPORT 1998

VICE PRESIDENTS:

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