**PROFIT** CORPORATION **ANNUAL REPORT** 

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **F96000003623**1. Corporation Name

MICHIGAN LECO CORPORATION

Principal Place of Business Mailing Address					-  1003100 4110 10110 04111 04111 0	ARA DOGA DORAF D	<b>jida</b> jiri <b>l b</b> iif	<b>B</b> 21 <b>046</b> (21) (20)	
3000 LAKEVIEW AVE. 3000 LAKEVIEW AVE.									
ST. JOSEPH MI 49085 ST. JOSEPH MI 49085								_	
US						DO NOT WRITE IN THIS SPACE			
ļ		Ÿ.				3. Date Incorporated or Qualifed			
2 Chairmain at	Di	1.5				07/18/1996			
} ·	Place of Business	2a. Mailing Address	<b>⊢</b> ,			4. FEI Number		A	pplied For
21		26				<b>38-0738518</b>		N <sub>1</sub>	ot Applicable
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		\$8.75	Additional
22	. 194	27				o. Certificate of Status Desired			equired
City & Sta	ate	City & State	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28	88			Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Zip Country			8. This corporation owes the current year Intangible			
24	25	29 30				Personal Property Tax. Yes No			
	<ul> <li>9. Name and Address of Curren</li> </ul>	t Registered Agent				10. Name and Address of New R	legistered A	gent	
	THE STATE OF			81	Name	<u> </u>		¥	7
	CORPORATION SYSTEM			_			·		
₩857120	O SOUTH PINE ISLAND ROAD		82 Street Addre			ss (P.O. Box Number is Not Accepta	.ble)		
PLANTATION FL 33324				83		1788 183 184 1818 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<u>C. C. C. Laboratoria de la co</u> La C.	- 115 to 2 221 1 2 2 2 4
	•		- 1						1237
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11 - Dursuon	t to the province of Sections COZ OFO	2 1 007 4500 51					<u> </u>	1	i i
office or	t to the provisions of Sections 607.050; registered agent, or both, in the State am familiar with, and accept the obligation	z and 507.1508, Florida Statute of Florida: Such change was a	s, the ab	ove-	-named corpor	ation submits this statement for the	purpose of c	nanging its	registered
🐯 agent. I	am familiar with, and accept the obligat	ions of, Section 607.0505, Flor	ida Statu	tes.	ine corporation	a board of directors, I flereby accep	t trie appoint	ment as re	gistered
SIGNATURE									:
12.	Signature, typed or printed name of registered agen			Agent :	signature required w	hen reinstating)	DATE		
	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFF	ICERS AND	DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 T/T	Æ		2000		Change	☐ Addition
NAME	WARREN, ROBERT J		1.2 NAME		ł	.,			
STREET ADDRESS			1.3 STF		ADDRESS				}
CITY-ST-ZIP	ST. JOSEPH MI 49085		1.4 CIT	Y-ST-	.ZIP				
TITLE ·	EV □ DELETE 2.1 TI		2.1 TITL					Change	Addition
NAME	WARREN FUTARERIA		2.2 NAM	Æ			!		ا (المعادية
STREET ADDRESS			2.3 STREET ADDRESS		(DOBESS				İ
CITY-ST-ZIP ST. JOSEPH MI 49085		the property with the second	2.35(1)						
TITLE	100		2. 4 CIT		-ZIP				
NAME OF S	DELONG, ROBERT S						ļ	Change ,	☐ Addition
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C/TY-ST-ZIP	ST. JOSEPH MI 49085		3.4. CIT		ZIP	。 主题 法经济基	1917年		贈問問題
TITLE	T	☐ DELETE	4.1 TITL	E		The state of the s	4月9月18日日	Change ;	Addition
NAME VIII VARIABI	WARREN, ELIZABETH S	· · · · · · · · · · · · · · · · · · ·	4. 2 NAA	Æ	1				
STREET ADDRESS			4.3 STR	EET AI	DDRESS				
CITY-ST-ZIP	ST. JOSEPH MI 49085		4.4 CITY	-ST-2	ZIP				
TITLE		☐ DELETE	5.1 TITLI			- 14		Change	Addition
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CITY-ST-ZIP	l PO		5.4 CITY		1	general general			1
TITLE	Version to the training	☐ DELETE	6.1 TITLE				<del>-</del>	700	
NAME	3000 LAXE FOR AVE		6 7 NAME				L	_} Change	☐ Addition

14. 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 annual report or supplemental 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 for on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

\$1,309346 91798

**FILED** 

Feb 06, 1999 8:00am

**Secretary of State** 

02-06-1999 90015 001 \*\*\*150.00