## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 29, 2004 8:00 am Secretary of State DOCUMENT # F98000002932 04-29-2004 90336 013 \*\*\*150.00 THYSSENKRUPP LOGISTICS, INC. Principal Place of Business Mailing Address 14014288 381 OSAGE DRIVE 400 RENAISSANCE CENTER MAUMEE, OH 43537 TAX DEPT STE 3900 DETROIT, MI 48243 2. Principal Place of Business 3. Mailing Address 22355 W. 11 Mile Rd. Suite, Apt. #, etc. 04152004 CR2E034 (10/03) Cha-P TAX DEPT Southfield, MI 48034-4735 City & State 4. FEI Number Applied For 52-2107657 Not Applicable Zip Zip Country 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 Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City 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. Lam familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition GREAVES, RICHARD J 22355 W. 11 Mile Rd. NAME NAME ADDRESS STREET ADDRESS 400 RENAISSANCE CENTER STE 3900 STREET ADDRESS TAX DEPT ONLY CITY-ST-ZIP DETROIT, MI 48243 CITY-ST-ZIP Southfield, MI 48034-4735 VPD TITLE Delete TITLE ☐ Addition NAME BABER, JAMES NAME STREET ADDRESS TKX LOGISTICS INC STREET ADDRESS CITY - ST- ZIP MAUMEE, OH 43537 CITY-ST-ZIF STD TITLE ☐ Delete TITLE Change ☐ Addition 22355 W. 11 Mile Rd. GILL, A. MALCOLM NAME NAME STREET ADDRESS 400 RENAISSANCE CENTER STE 3900 TAX DEPT HODRESS STREET ADDRESS Southfield, MI 48034-4735 ONLY CITY-ST-ZIP DETROIT, MI 48243 CITY-ST-7IP TITLE ☐ Delete TITLE 22355 W. 11 Mile Rd. DUFF, DANIEL V JR. NAME NAME ADDAESS 400 RENAISSANCE CENTER STE 3900 STREET ADDRESS STREET ADDRESS TAX DEPT ONLY CITY-ST-ZIP DETROIT, MI 48243 CITY-ST-ZIP Southfield, MI 48034-4735 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. 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 cath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

A. MAKLOWM GILL GING OFFICER OR DIRECTOR SEC/TREASURER/DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF

FILED