

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 25, 1999 8:00 am
Secretary of State

02-25-1999 90021 015 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P32813

1. Corporation Name
ROYAL PREMIUM BUDGET, INC.

Principal Place of Business 30833 NORTHWESTERN HWY 220 FARMINGTON HILLS MI 48334 US	Mailing Address 30833 NORTHWESTERN HWY 220 FARMINGTON HILLS MI 48334 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/14/1991

4. FEI Number

38-2918709

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22
City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27
City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	KAUFMAN, HERBERT W.	
STREET ADDRESS	29355 NORTHWESTERN HWY.	
CITY-ST-ZIP	SOUTHFIELD MI	
TITLE	S	☒ DELETE
NAME	BOTHE, BROOKE	
STREET ADDRESS	5659 BULLARD ROAD	
CITY-ST-ZIP	FENTON MI	
TITLE	T	☒ DELETE
NAME	WESOLOWSKI, GERALD	
STREET ADDRESS	12025 BRANDYWINE	
CITY-ST-ZIP	BRIGHTON MI	
TITLE	D	☒ DELETE
NAME	HORTON, GERALD W.	
STREET ADDRESS	4553 OAK POINTE	
CITY-ST-ZIP	BRIGHTON MI	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	S
2.3 STREET ADDRESS	Heckel, Marilyn A.
2.4 CITY-ST-ZIP	4806 Walnut Lake Rd., B. Hills, MI 48301
3.1 TITLE	☐ Change ☒ Addition
3.2 NAME	V. P. Finance
3.3 STREET ADDRESS	Rob Fekaris
3.4 CITY-ST-ZIP	2560 Lone Pine Rd., W. Bfield, MI 48323
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Rob Fekaris
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-13-99

248-932-9000

CR2E034 (1/98)