

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003545

Entity Name: EQ INDUSTRIAL SERVICES, INC.**Current Principal Place of Business:**17440 COLLEGE PARKWAY
SUITE 300
LIVONIA, MI 48152**Current Mailing Address:**17440 COLLEGE PARKWAY
SUITE 300
LIVONIA, MI 48152 US**FEI Number:** 38-3440786**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DIRECTOR
Name	BELL, SIMON G.
Address	101 S. CAPITOL BLVD. SUITE 1000
City-State-Zip:	BOISE ID 83702

Title	DIRECTOR
Name	FEELER, JEFFREY R.
Address	101 S. CAPITOL BLVD. SUITE 1000
City-State-Zip:	BOISE ID 83702

Title	TREASURER
Name	RICKABAUGH, RYAN
Address	17440 COLLEGE PARKWAY SUITE 300
City-State-Zip:	LIVONIA MI 48152

Title	VP
Name	RICKABAUGH, RYAN
Address	17440 COLLEGE PARKWAY SUITE 300
City-State-Zip:	LIVONIA MI 48152

Title	VP
Name	ERSKINE, BRIAN
Address	17440 COLLEGE PARKWAY SUITE 300
City-State-Zip:	LIVONIA MI 48152

Title	DIRECTOR
Name	SCHODOWSKI, SCOTT
Address	17440 COLLEGE PARKWAY SUITE 300
City-State-Zip:	LIVONIA MI 48152

Title	PRESIDENT
Name	SCHODOWSKI, SCOTT
Address	17440 COLLEGE PARKWAY SUITE 300
City-State-Zip:	LIVONIA MI 48152

Title	VP
Name	GEIS, TERRY A.
Address	17440 COLLEGE PARKWAY SUITE 300
City-State-Zip:	LIVONIA MI 48152

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: WAYNE R. IPSEN**SECRETARY****04/22/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	SECRETARY
Name	IPSEN, WAYNE R.
Address	101 S. CAPITOL BLVD. SUITE 1000
City-State-Zip:	BOISE ID 83702