FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUM		308620	(9)						
1. Corporation f	_{Name} NAL GARAGES I	NCORPORATI	FD						
HATIOI	THE UNITIOES I								
Principal Place o	of Business		Mailing Address				-		A BIOID BION DIDIA DIBIN ADBI
550 WEST FORT STREET 550 WEST FORT STREET									
DETROIT MICHIGAN 48226-3132 DETROIT MICHIGAN 48226-3132									
							3. Date Incorporated or Qualified 07/13/1951		of Last Report 5/01/1995
2. Principal Plac	pe of Business	a. Mailing Address]				4. FEI Number 38-1274553		Applied For Not Applicable	
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.				Certificate of Status Desired		\$8.75 Additional	
22		27				5. Certificate of Status Desireo		Fee Required	
City & State			City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Ζip	Count		Zıp	Cour	ntry		8. This corporation has liability for		cunder s 199.032,
24	25 29 9. Name and Address of Current Reg			30			Florida Statutes Services Services Services Florida Statutes Services Services Florida Statutes Services Servic		
	9. Name and Addr	ess of Current He	gistered Agent		81	Name	10. Name and Address of New H	egistereo A	.gent
CT COR	PORATION SYSTE	vi					ss (P.O. Box Number is Not Acceptab	10)	
1200 S. PINE ISLAND ROAD					82	Street Addre	iss (F.O. Box Number is not Acceptate	10,	
	TION FL 33324			•	83			•	
				ł	84	City			85 Zip Code
		207.0500	1 007 4500 Et 11 01 1	- 4	Ц.		tion as basis this statement for the pur	FL	noing its societored office
or registere	d agent, or both, in the	e State of Florida. S	Buch change was authorize	ed by the c	ve-na corpor	med corpora ation's board	ition submits this statement for the pur f of directors. I hereby accept the app	pose or char pintment as i	registered agent. I am
familiar with	n, and accept the oblig	ations of, Section 6	607.0505, Florida Statutes.						
SIGNATURE	Signature, typed or printed name	e of registered agent and to	itie if applicable (NO	TE Registered	Agort s	signature required	when reinstating)	DATE	
12.		OFFICERS AND DI		13.			ADDITIONS/CHANGES TO OFF		
TITLE	PD Peabody, Bra	N EV M	DELETE	1 1 1		14	ce-President	L] Change 🔀 Addition
NAME	267 KENWOOD			1.2 N/		Je.	ccy t. Dilliter		
STREET ADDRESS	GROSSE POINT				TY - ST -		461 Steeple View orthville Twp., M	1748	167
DITUE	STD		[] DELETE	2 1 Ti		NO	orthuille IWP. III	<u>, , , , , , , , , , , , , , , , , , , </u>	Change Addition
NAME	NICHOLLS, RAL	PH	ے	2.2 NA	AME			-	_
STREET ADDRESS	29215 NEW BR/			2351	TREET A	DDRESS			
CITY - \$T - ZIP	FARMINGTON H	IILL,MI 00000		2.4 C)	TY-ST-	ZIP			
TITLE	VD	05.11	DELETE	3 1 T	TLF				Change: Addition
NAME	BROWN, GEOR 11805 S BRIARI			: 32 NA					
STREET ADDRESS	MIDLOTHIAN VA					NDDRESS			
CITY-ST-ZIP TITLE	MIDEO I IIIAN 17	· · · · · · · · · · · · · · · · · · ·	T DELETE	4 1 7	ITLE	· ZIP			Change Addition
NAME			C seeme	4.2 N				L -	,
STREET ADDRESS						DORESS			
CITY-ST-ZIP					ITY-ST-				
TITLE			DELETE	5.17	I1L€				Change Addition
NAME				5.2 N	AME	}			
STREET ADDRESS	•			5.3 S	TREET A	DORESS			
CHY-ST-ZIP			FIRE		TY-ST	ZIP			Chang: Addition
TITLE			☐ D€L€TÉ	6.11				L.	Chang: Addition
NAME OXECULAR DEPOS				6.2 N		DDDEEC			
STREET ADDRESS					IHEET A ITY-ST	DDRESS			
CITY-ST-ZIP 14. I do hereby	y certify that the inform	ation supplied with	this filing is voluntarily furn	ished and	does	not qualify for	or the exemption stated in Section 119	.07(3)(k), Flo	rida Statutes. I further
certify that	the information Indicat Lam an officer or direct	ed on this annual r tor of the corporation if changed, or on a	enort or supplemental and	ua! report i e empowe	is true	and accurat	e and that my signature shall have the sreport as required by Chapter 607, F	same legal i	effect as it made under

SIGNATURE: Pale 1 Melve RALPH N. N. C. HOLLS 4)25)94 3139635839