

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED
Jul 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **827506** (7)
1. Corporation Name
AMS INDUSTRIES, INC.

Principal Place of Business
**6501 E NEVADA
DETROIT MI 48234**

Mailing Address
**6501 E NEVADA
DETROIT MI 48234**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/01/1972	3a. Date of Last Report 04/24/1996
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 13-2684507	Applied For <input type="checkbox"/> Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPT	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOVEJOY, ROBERT M JR.	1.2 NAME	
STREET ADDRESS	5801 E. NEVADA	1.3 STREET ADDRESS	
CITY-ST-ZIP	DETROIT MI	1.4 CITY-ST-ZIP	
TITLE	AC	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACKSON, EDWARD J.	2.2 NAME	
STREET ADDRESS	6501 E NEVADA	2.3 STREET ADDRESS	
CITY-ST-ZIP	DETROIT MI	2.4 CITY-ST-ZIP	
TITLE	PD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ASHTON, HARRIS J	3.2 NAME	
STREET ADDRESS	ONE STATION PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	STAMFORD CT	3.4 CITY-ST-ZIP	
TITLE	VD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIMPSON, JAMES R	4.2 NAME	
STREET ADDRESS	6501 E. NEVADA	4.3 STREET ADDRESS	
CITY-ST-ZIP	DETROIT MI	4.4 CITY-ST-ZIP	
TITLE	VS	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVERINGHAM, J. T	5.2 NAME	
STREET ADDRESS	6501 E NEVADA	5.3 STREET ADDRESS	
CITY-ST-ZIP	DETROIT MI	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE:

[Signature]

7/29/97

CR2E034 (4/97)

**AMS INDUSTRIES, INC.
OFFICERS AND DIRECTORS**

1996/1997

TITLE	NAME	BUSINESS ADDRESS	RESIDENCE ADDRESS	SOCIAL SECURITY #
CHAIRMAN OF THE BOARD, PRESIDENT & CEO	HARRIS J. ASHTON	METRO CENTER, ONE STATION PLACE STAMFORD, CT 06902	191 CLAPBOARD RIDGE ROAD GREENWICH, CT 06830	111-24-1973
VICE PRESIDENT & TREASURER	ROBERT M. LOVEJOY, JR.	6501 E. NEVADA DETROIT, MI 48234	4134 CARILLON BLOOMFIELD HILLS, MI 48302	451-52-4715
VICE PRESIDENT & CONTROLLER	JAMES R. SIMPSON	6501 E. NEVADA DETROIT, MI 48234	1825 OLD HOMESTEAD DRIVE ROCHESTER HILLS, MI 48306	044-44-9663
VICE PRESIDENT	J. THEODORE EVERINGHAM	6501 E. NEVADA DETROIT, MI 48234	16840 ST. PAUL AVENUE GROSSE POINTE, MI 48230	371-38-4235
ASSISTANT TREASURER	DAVID LOSEK	6501 E. NEVADA DETROIT, MI 48234	23734 CURTIS DR FLAT ROCK, MI 48134	380-84-0872
DIRECTOR	HARRIS J. ASHTON	METRO CENTER ONE STATION PLACE STAMFORD, CT 06902	191 CLAPBOARD RIDGE ROAD GREENWICH, CT 06830	
DIRECTOR	ROBERT M. LOVEJOY, JR.	6501 E. NEVADA DETROIT, MI 48234	4134 CARILLON BLOOMFIELD HILLS, MI 48302	
DIRECTOR	JAMES R. SIMPSON	6501 E. NEVADA DETROIT, MI 48234	1825 OLD HOMESTEAD DRIVE ROCHESTER HILLS, MI 48306	