PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 851620

1. Corporation Name

DETROCHEM FOUIDMENT CO

	FILM EQUIPMENT CO.					
Principal Place	Mailing Address					
1715 STICKNEY STE. C-5 SARASOTA FL		1412 E 11 MILE ROYAL OAK MI 48067-026 US			DO NOT WRITE IN THIS SPACE	
US						3. Date Incorporated or Qualifed 01/16/1982
Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
21 7466 MONTE VERDE 26						38-1848633 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired
City & State City & State						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23 SAR	Country Zip Country			ntne		
Zip 2 (/ ɔ		Zip Count				8. This corporation owes the current year Intangible Personal Property Tax.
24 342	9. Name and Address of Current		<u>"</u>			10. Name and Address of New Registered Agent
	Trains and Address of Control			81	Name	
SCHURR, DONALD K				82	Ctract Ad	ddress (P.O. Box Number is Not Acceptable)
	MONTE VERDE		1	82	Street Ad	ddiess (F.O. Box Number is Not Acceptable)
SAR		1	83	ı		
				84	City	85 Zip Code
					-	FL []
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: Regis				Agent	t signature requ	juired when reinstating) DATE
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			1.1 117			Change : Addition
NAME	TAGE TOO TE A STORY		1.2 NA			
STREET ADDRESS	CADACOTA EL 00000 04000				ADDRESS	
CITY-ST-ZIP			1.4 CIT 2.1 TIT			VPD ⊠Change □ Addition
NAME	SCHURR, SANDRA L		2.2 NAME		'	# · -
STREET ADDRESS	TARA MARKET LETTER				ADDRESS	ĺ
·CITY-ST-ZIP ~~~			2. 4 CF			
TITLE	D	☐ DELETE	3.1 TITLE			Change Addition
NAME	PIKE, FRED C	PIKE, FRED C 321		ME		•
STREET ADDRESS	RESS 1412 E 11TH MILE ROAD 3.35		3.3 ST	REET	ADDRESS	
CITY-ST-ZIP			3.4. CI	TY-S	T-ZIP	
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	1		4.2 N	AME	-	
STREET ADDRESS			4.3 ST	REET	ADDRESS	
CITY-ST-ZIP			4.4 CI		r-zip	
TILE		☐ DELETE	5.† T∏			☐ Change ☐ Addition
	I		5.2 NA	ME	1	

STREET ADDRESS ¿ …,> 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 of 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 ap attacomment with an adapters, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Change

☐ Addition

FILED

Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90055 020 ***150.00