2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000000559

Entity Name: PREFERRED TECHNICAL GROUP, INC.

FILED Apr 29, 2003 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	ERVIEW DRIVE ER HILLS, MI				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P.O. BOX 1 TOLEDO, 0					
FEI Number:	38-3071185	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US					
The above in the State		ubmits this statement for the pur	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	:E:				
	Electroni	c Signature of Registered Agen	t	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () HILZENDEGER, 2910 WATERVIE ROCHESTER HI	W DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPT () PATON, A. GLEN 4500 DORR STR TOLEDO, OH 43	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPS () I WURSTER, LISA 4500 DORR STE TOLEDO, OH 43	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AT () CZARKA, CHRIS 4500 DOOR STF TOLEDO, OH 43	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BUSHROE, JOS 4500 DOOR STE TOLEDO, OH 43	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	VP () I MADDEN, THOM 4500 DORR STR	REET	Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHRISTOPHER J. CZARKA AT 04/29/2003