
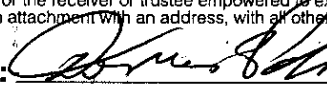


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2004 8:00 am
Secretary of State

07-26-2004 90008 043 ***150.00

DOCUMENT # F03000001382 1. Entity Name MSX INTERNATIONAL ENGINEERING SERVICES, INC.			
Principal Place of Business 496 SOUTH DELANEY AVE., SUITE 406-B ORLANDO, FL 32801		Mailing Address 22355 WEST 11 MILE ROAD SOUTHFIELD, MI 48034	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 1950 Concept Drive Suite, Apt. #, etc.	
City & State Zip		City & State Warren, MI Zip 48091	
Country U.S.A.		4. FEI Number 38-3323110	
5. Certificate of Status Desired <input type="checkbox"/>		Applied For Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
\$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD STALLKAMP, THOMAS T	Delete <input checked="" type="checkbox"/>	TITLE President, Director
NAME	22355 W. 11 MILE ROAD		NAME Park Payne
STREET ADDRESS	SOUTHFIELD, MI 48034		STREET ADDRESS 1950 Concept Drive
CITY-ST-ZIP			CITY-ST-ZIP Warren, MI 48091
TITLE	VSTD	Delete <input type="checkbox"/>	TITLE
NAME	MINTURN, FREDERICK K		NAME
STREET ADDRESS	22355 W. 11 MILE ROAD		STREET ADDRESS 1950 Concept Drive
CITY-ST-ZIP	SOUTHFIELD, MI 48034		CITY-ST-ZIP Warren, MI 48091
TITLE	ASAT	Delete <input type="checkbox"/>	TITLE
NAME	PIKE, DENNIS		NAME
STREET ADDRESS	22355 W. 11 MILE ROAD		STREET ADDRESS 1950 Concept Drive
CITY-ST-ZIP	SOUTHFIELD, MI 48034		CITY-ST-ZIP Warren, MI 48091
TITLE	CD	Delete <input checked="" type="checkbox"/>	TITLE
NAME	BILLIG, E H		NAME
STREET ADDRESS	22355 W. 11 MILE ROAD		STREET ADDRESS 1950 Concept Drive
CITY-ST-ZIP	SOUTHFIELD, MI 48034		CITY-ST-ZIP Warren, MI 48091
TITLE		Delete <input type="checkbox"/>	TITLE
NAME			NAME
STREET ADDRESS			STREET ADDRESS 1950 Concept Drive
CITY-ST-ZIP			CITY-ST-ZIP Warren, MI 48091
TITLE		Delete <input type="checkbox"/>	TITLE
NAME			NAME
STREET ADDRESS			STREET ADDRESS 1950 Concept Drive
CITY-ST-ZIP			CITY-ST-ZIP Warren, MI 48091
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Asst. Sec. / Asst. Treas.	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 7/13/04 Daytime Phone # (248) 829-6002	