2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

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DOCUMENT # F03000001710 1. Entity Name FILFD MADACY SPECIAL PRODUCTS, INC. 04 AUG 31 AN 10:11 Principal Place of Business Mailing Address 2333 MORRIS AVENUE, SUITE C-2 SECRETARY WE STATE 2333 MORRIS AVENUE, SUITE C-2 **UNION NJ 07083 UNION NJ 07083** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (4/04) City & State City & State Applied For 4. FEI Number 81-0601078 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 \ 9. Election Campaign Financing \$5.00 May Be DUE BY September 8, 2004 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 17. OFFICERS AND DIRECTORS HARRIS STERING EUP TITLE TITLE Change **Delete** NAME STROME, STEPHEN NAME 2333 Mams AN suite C.Z STREET ADDRESS 500 KIRTS BLVD. STREET ADDRESS TROY MI 48084 CITY-ST-ZIP CITY-ST-ZIP UNION, NJ 01083 TITLE VCT Delete TITLE Change ☐ Addition NAME BRAIM, THOMAS C JR NAME **300041012803** 09713704--01072--011 **15 STREET ADDRESS 500 KIRTS BLVD. STREET ADDRESS **150.00 CITY-ST-ZIP **TROY MI 48084** CITY-ST-ZIP TITLE . DS Delete TITI É ☐ Change ☐ Addition NAME -CLINE, PETER J NAME STREET ADDRESS 500 KIRTS BLVD. STREET ADDRESS CITY-ST-ZIP TROY MI 48084 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C!TY-ST-ZIP Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

ATTACHMMT # F03000001710

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HARRIS STERLING Executive Vice President

MAGET MAINER Late fee as

I were received in that voter.

Also - please file the amount

report first & then se d

contitued of name sharpe to

the amendment section.

HARRY

Ideal Professional Park, 2333 Morris Avenue, Suite C-2

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Union, NJ, U.S.A. 07083

908 686 6300 ext. 202 908 686 9267 hsterling@madacy.com