

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F39398

(5)

1. Corporation Name
ARGUS SERVICES, INC.

Principal Place of Business
3910 EAST AVON ROAD
PANAMA CITY FL 32404

Mailing Address
3400 EAST LAFAYETTE
DETROIT MI 48207
US

FILED
Oct 15 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified

06/04/1981

4. FEI Number

59-2100622

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
%C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	LEVIN, YALE	
STREET ADDRESS	3400 E LAFAYETTE	
CITY-ST-ZIP	DETROIT MI	
TITLE	EVD	<input checked="" type="checkbox"/> DELETE
NAME	SAPUTO, PETER C	
STREET ADDRESS	3400 E LAFAYETTE	
CITY-ST-ZIP	DETROIT MI	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	ASCIUTTO, GEORGE D.	
STREET ADDRESS	3400 E LAFAYETTE	
CITY-ST-ZIP	DETROIT MI	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	MCCANN, KATHLEEN B.	
STREET ADDRESS	3400 E LAFAYETTE	
CITY-ST-ZIP	DETROIT MI	
TITLE	VT	<input checked="" type="checkbox"/> DELETE
NAME	PIESKO, MICHAEL L.	
STREET ADDRESS	3400 E LAFAYETTE	
CITY-ST-ZIP	DETROIT MI	
TITLE	S	<input checked="" type="checkbox"/> DELETE
NAME	MANCZAK, RICHARD P.	
STREET ADDRESS	3400 E LAFAYETTE	
CITY-ST-ZIP	DETROIT MI	

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

See
the
attached

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), 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: *[Signature]*

10/9/98

713/512-6200

CR2E034 (5/98)

OFFICERS	OFFICE	ADDRESS
Miller J. Mathews, Jr.	President	1001 Fannin, Suite 4000 Houston, Texas
Earl E. DeFrates	Executive Vice President Chief Financial Officer	1001 Fannin, Suite 4000 Houston, Texas
Gregory T. Sangalis	Senior Vice President Secretary Sole Director	1001 Fannin, Suite 4000 Houston, Texas
Bruce E. Snyder	Vice President Chief Accounting Officer Assistant Secretary	1001 Fannin, Suite 4000 Houston, Texas
Ronald H. Jones	Vice President Treasurer	1001 Fannin, Suite 4000 Houston, Texas
Bryan J. Blankfield	Vice President Assistant Secretary	1001 Fannin, Suite 4000 Houston, Texas
Jeffrey A. Draper	Vice President Assistant Treasurer	1001 Fannin, Suite 4000 Houston, Texas
Lee A. McCormick	Assistant Treasurer	