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PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9300004145 1. Corporation Name

OUTLET CORP.

Mailing Address

## FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90042 037 \*\*\*150.00



| Principal Place      | of Business  | Mailing Address                   |                      |          |                                       |                                |   |            |                   |              |  |
|----------------------|--|-----------------------------------|----------------------|----------|---------------------------------------|--------------------------------|---|------------|-------------------|--------------|--|
| 21001 VAN EIORN ROAD |  | 21001 VAN BORN ROAD               |                      |          |                                       |                                |   |            |                   |              |  |
| TAYLOR MI 48180      |  | TAYLOR MI 48180                   |                      |          |                                       | DO NOT WRITE IN THIS SPACE     |   |            |                   |              |  |
| US                   |  | US                                |                      |          |                                       | Date Incorporated or Qualifed  |   |            |                   |              |  |
|                      |  |                                   |                      |          |                                       | 09/13                          | •   |            |                   |              |  |
| 2. Principal P       | ace of Business  | 2a. Mailing Address               | 2a. Mailing Address  |          |                                       |                                | 4. FEI Number                             |            |                   | Applied For  |  |
| 21                   | acc of business  | 26                                |                      |          | 38-3124871                            |                                | Not Applicable                            |            |                   |              |  |
| Suite, Ast.          | #. etc.  | Suite, Apt. #, etc.               |                      |          |                                       | E Cartife to at Status Desired |   |            | \$8.75 Additional |              |  |
| 22                   | .,   | 27                                |                      |          | 5. Certifo                            | ite of Status Desired          |   | Fee        | Recuired          |              |  |
| City & State         | <del></del>  | City & State                      |                      |          | 6. Election                           | Campaign Financing             |   | \$5.0      | 0 May Be          |              |  |
|                      |  | 28                                |                      |          | Trust Fund Contribution Added to Fees |                                |   |            |                   |              |  |
| Zip                  | Cour try Zip   |                                   | Coun                 | Country  |                                       | 8. This co                     | 8. This corporation owes the current year |            |                   |              |  |
| 24                   | 2529   |                                   | 30                   |          | Taroctar repairs                      |                                |   | XX Yes No  |                   |              |  |
|                      | 9. Name and Address of Curren  | t Registered Agent                |                      |          |                                       | 10. Name                       | and Address of New                        | Registered | Agent             |              |  |
| СТ                   | CODDODATION SYSTEM   |                                   |                      | 81   1   | Name                                  |                                |   |            |                   |              |  |
|                      | CORPORATION SYSTEM   |                                   | 82 Street Acd        |          |                                       | dress (P.O. Box                | Number is Not Accept                      | able)      |                   |              |  |
|                      | SOUTH PINE ISLAND ROAD   |                                   | L                    |          |                                       |                                |   |            |                   |              |  |
| PLAN                 | ITATION FL 33324   |                                   | {                    | 83       |                                       |                                |   |            |                   |              |  |
|                      |  |                                   | <u> </u>             | 84 (     | City                                  |                                |   | :          | 85 Zi             | o Code       |  |
|                      | to the provisions of Sections 607.050  |                                   |                      |          | •                                     |                                |   | Fl         | _                 |              |  |
| agent. I a           | to the provisions of sections 607,050,<br>egistered agent, or bo h, in the State<br>m familiar with, and accept the obliga | tions of, Section 607.0505, Flori | ida Statul           | tes.     | Сопрои                                | Mond Board or C                |   | <b>.</b>   |                   |              |  |
| SIGNATURE            | Signature, typed or printed na ne of registered ager   |                                   |                      | ∖gent si | ignature requ                         | ired when reinstating)         |   | DATE       |                   | 505:0 111.40 |  |
| 12.                  | OFFICERS AN  | DIRECTORS                         | 13.                  |          |                                       | ADDITIC                        | NS/CHANGES TO OF                          | -FICERS A  | XX Chang          | e Addition   |  |
| TITLE                | POWER OFFICE W   | ☐ DELETE                          | 1.1 TITL             |          |                                       |                                |   |            | □ Chang           | Z ZAGGON     |  |
| NAME                 | BOYLAN, GERARD W   |                                   | 1.2 NAM              |          |                                       |                                |   |            |                   |              |  |
| STREET ADDRESS       | 21001 VAN BORN RD  |                                   | 1                    |          | DDRESS                                |                                |   | 48180      |                   | Į            |  |
| CITY-ST-ZIP          | TAYLOR MI  | □ DELETE                          | 14 CIT               | _        | ZIP                                   | _                              |   |            | XX Chang          | e 🔲 Addition |  |
| TITLE                | VTD  | □ pereie                          | 2.1 TITL             |          | ŀ                                     |                                |   |            | Onding            |              |  |
| NAME                 | MOSTELLER, RICHARD G   |                                   | 2 2 NAN              |          |                                       |                                |   |            |                   |              |  |
| STREET ADDRE 3S      | 21001 VAN BORN ROAD  |                                   |                      |          | DORESS                                |                                |   | 48180      |                   |              |  |
| CITY-ST-ZIP          | TAYLOR MI  | <u> </u>                          | 2.4 CIT<br>3.1 TITL  |          | ZIP                                   | . <u></u>                      |   | 40100      | Chang             | e Addition   |  |
| TITLE                | ALMARGOEA LDVANA M   | M. Aperer E                       | 3.1 IIIL             |          |                                       |                                |   |            |                   |              |  |
| NAME                 | HENNESSEY, FRANK M<br>21001 VAN BORN ROAD  |                                   |                      |          | 200000                                |                                |   |            |                   |              |  |
| STREET ADDRE 3S      |  |                                   |                      |          | DDRESS<br>710                         |                                |   |            |                   |              |  |
| CITY-ST-ZIP          | TAYLOR MI<br>V   | DELETE                            | 3.4. CIT<br>4.1 TITL |          | LIF*                                  | · <del>_</del>                 |   |            | Chang             | e Addition   |  |
| TITLE                | DORAN, DAVID A   | - Pritit                          | 4.1 MA               |          |                                       |                                |   |            |                   |              |  |
| NAME                 | 21001 VAN BORN ROAD  |                                   |                      |          | DORESS                                |                                |   |            |                   |              |  |
| STREET ADORE 3S      | TAYLOR MI 48180  |                                   | 4.4 CIT              |          | 1                                     |                                |   |            |                   |              |  |
| CITY-ST-ZIP          | D  | ☐ DELETE                          | 5.1 TITL             |          | -11                                   |                                |   |            | XX Chang          | e Addition   |  |
| NAME                 | KENNEDY, RAYMOND F   |                                   | 5.2 NAN              |          |                                       |                                |   |            |                   |              |  |
| STREET ADDRESS       | 21001 VAN BORN ROAD  |                                   |                      |          | DDRESS                                |                                |   |            |                   |              |  |
|                      | TAYLOR MI  |                                   | 5.4 CIT              |          | 1                                     |                                |   | 48180      |                   | '            |  |
| CITY-ST-ZIP          | VSD  | ☐ DELETE                          | 6.1 TITL             |          |                                       |                                |   |            | XX Chang          | e Addition   |  |
| NAME                 | GARGARO, EUGENE A. JR.   | <del>_</del> _                    | 6.2 NAM              | ME       |                                       |                                |   |            |                   |              |  |
| STREET ADORE S       | 21001 VAN BORN RD.   |                                   |                      |          | DORESS                                |                                |   |            |                   |              |  |
| STREET ALAURE S      | TAVI OR MI   |                                   | 64 CIT               |          | 1                                     |                                |   | 48180      |                   |              |  |

TAYLOR MI

14. I hereb / 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 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 recuired 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, with all other like empowered.

SIGNATURE:

David A. Doran

4/22/99

313/274-7400