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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name F9400000593 (3)

FILED May 21 1998 8:00am Secretary of State

(517) 780 - WUNC

| DAWN | PUOD PRODUCTS, INC. | | | | | |
|---|--|---------------------------------------|--|--------------------------------|--|--|
| Principal Place | e of Business | Mailing Address | | | 3 Janithi ginn ennit afnit antel antel abitt gibrit | #### ################################# |
| 2021 MICOR E | DRIVE | 2021 MICOR DRIVE | | | | |
| JACKSON MI | 49203 | JACKSON MI 48203 | JACKSON MI 48203 | | | |
| | | | | | DO NOT WRITE IN TH | IIS SPACE |
| | | | | | 3. Date Incorporated or Qualified 02/08/1994 | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | 2a. Mailing Address | | 4. FEI Number | Applied For |
| 21 | | 26 | | 35-1438925 | Not Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 | | 27 | | | The Continuate of States Booked | Fee Required |
| City & State | | City & State | | 6. Election Campaign Financing | \$5.00 May Be | |
| Zip Country | | · · · · · · · · · · · · · · · · · · · | Zip Country | | Trust Fund Contribution | Added to Fees |
| 24 | } <u>-</u> , ' | Zip | - | У | This corporation owes or has paid the | current year Intangible |
| 24 | 9. Name and Address of Curren | 29 nt Registered Agent | 30 | | Personal Property Tax due June 30. 10. Name and Address of New Register | |
| CT | CORPORATION SYSTEM | | 81 | Name | | |
| | O SOUTH PINE ISLAND ROAD | | ļ | | | |
| | NTATION FL 33324 | | 87 | Street Addr | ess (P.O. Box Number is Not Acceptable) | i |
| | | | 83 | , | | |
| • | | | | | | |
| | | | 84 | City | F | 85 Zip Code |
| Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was authori agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida S | | | | by the corporati | oration submits this statement for the nurros | e of changing its registered |
| SIGNATURE | | | | | | |
| | Signature, typed or printed name of registered ago | | NOTE: Registered Ag | gent signature require | | |
| TITLE | OFFICERS AND | DELETE DELETE | 13. | | ADDITIONS/CHANGES TO OFFICERS A | |
| | JONES, RONALD L | | 1.1 TITLE | | | L Change L Addition |
| NAME OTOGET ADDRESS | 2021 MICOR DRIVE | | 1.2 NAME | | | |
| STREET ADDRESS | JACKSON MI | 1.3 STREET ADDRESS | | | | Į: |
| CITY-ST-ZIP TITLE | S DEL | | 1.4 CITY- 2.1 TITLE | ST - ZiP | | Change Addition |
| NAME | JONES, MARVEL C | | 2.1 HILE 2.2 NAME | | | C ollaride C vocilion |
| STREET ADDRESS | 2021 MICOR DRIVE | | | T ADDRESS | | |
| CHY-ST-ZIP | JACKSON MI | | | | | |
| TITLE | VD | DELETE | 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE | | | Change Addition |
| NAME | JONES, MILES E | | 3.2 NAME | | | |
| STREET ADDRESS | 2021 MICOR DRIVE | | • | T ADORESS | | |
| CITY-ST-ZIP | JACKSON MI | | 3.4. CITY- | | | İ |
| TITLE | TD DELETE | | 4.1 TITLE | w. p.11 | | Change Addition |
| NAME | STAELENS, PETER J | | 4. 2 NAME | : | | |
| STREET ADDRESS | 2021 MICOR DRIVE | | 4.3 STREE | 1 ADDRESS | | |
| CITY-ST-ZIP | Jackson Mi | | 4.4 CHY- | | | |
| TITLE | | DELETE | 5.1 TITLE | | | Change Addition |
| NAME | CROW, PHILIP E | | | | | |
| STREET ADDRESS | 2021 MICOR DRIVE | | 5.3 STREE | T ADDRESS | | |
| CITY-ST-ZIP | JACKSON MI 49203 | | 5.4 CITY- | | | |
| TITLE | V | ☐ DELETE | 6.1 TITLE | | | ☐ Change ☐ Addition |
| NAME | NALLY, JOHN C | | 6.2 NAME | | | |
| STREET ADDRESS | 2021 MICOR DRIVE | | 6.3 STREE | T ADDRESS | | |
| CITY-ST-ZIP | JACKSON MI | | 64 CITY- | ST-ZIP | | |
| 44 I bereby o | artiful that the information aumented wi | ith this files does not suglif | | | Costion 110 07/3\/i) Elerida Ctatutos I further | and first at a lafa and at an |

with this ming does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information of 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 accurate empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in action on with an address. indicated on this annual reproficer or director of the con-Block 12 or Block 13 if chan