## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # F95000003123

1. Entity Name

BENCHMARK TECHNOLOGIES, INC.



Principal Place of Business

4660 13TH ST. WYANDOTTE, MI 48192 Mailing Address

4660 13TH ST.

WYANDOTTE, MI 48192

FILED Jul 21, 2006 08:00 AM Secretary of State



DO	NOT	WRITE	IN	THIS	SPACE

07172006 No Chq-P CR2E034 (11/05)

 4. FEI Number
 Applied For

 38-1513124
 Not Applicable

5. Certificate of Status Desired 

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

COOK, W. FRED 997 FRANCISCAN SEBASTIAN, FL 32958

the obligations of registered agent.

## DO NOT WRITE IN THIS SPACE

SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere					e required when reinstating)	U00000571703 07/21/06-86666 013 150.00	
	LE NOW!!! FEE IS \$150.00 ue by September 6, 2006		mpaign Financing Contribution.		\$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			1.			·	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COOK, RICHARD F 8272 GRAYFIELD DEARBORN HEIGHTS, MI		,			All many many many many many many many many	
TITLE NAME	VTSD COOK PAUL E		<u> </u>		E ** to	Mark to the second	

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

STREET ADDRESS 952 LINCOLN CITY-ST-ZIP GROSSE PTE., MI TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 1.19. 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:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

7-17-6

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