2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 01, 2001 8:00 am Secretary of State DÖCUMENT # F9500003636 MIDWEST STEEL ERECTION, INC. 02-01-2001 90134 015 ***158.75 Principal Place of Business Mailing Address 2525 E. GRAND BLVD. 2525 E. GRAND BLVD. DETROIT MI 48211 DETROIT MI 48211 911386 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 38-2871555 Not Applicable Country Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** Zip Code City FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Delete **VPS** Change ☐ Addition TITLE ☐ Delete TITLE No longer with the company. HAYES, EDWARD M NAME NAME Has not been replaced. STREET ADDRESS 2525 E. GRAND BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DETROIT MI 48211 TITLE Change ☐ Addition TITLE ☐ Delete Broad, Gary NAME NAME STREET ADDRESS 2525 E. GRAND BLVD. STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Detroit MI 48211 TITLÉ Change - Addition ☐ Defete TITLE SMITH, ROBERT F NAME NAME STREET ADDRESS 2525 E GRAND BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **DETROIT MI** Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE Broad, President/COO

13. 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 11 or Block 12 if

changed, or on an attachment with an address, with all other like empowered.