

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90009 033 ***150.00

DOCUMENT # F96000002914

1. Entity Name
MULTI-BANK SECURITIES, INC.

Principal Place of Business Mailing Address
28411 NORTHWESTERN HWY #1350 **28411 NORTHWESTERN HWY #1350**
SOUTHFIELD MI 48034 **SOUTHFIELD MI 48034**

2. Principal Place of Business 3. Mailing Address
24280 Woodward **24280 Woodward**

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Pleasant Ridge, MI **Pleasant Ridge, MI**

Zip Country Zip Country
48069 **USA** **48069** **USA**

4. FEI Number Applied For
38-2781895 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DREWS, MICHAEL W
2400 E. COMMERCIAL BLVD., # 815
FT LAUDERDALE FL 33308

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 *David Maccagone* **4/24/02**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
TD	MACCAGONE, JEFFEREY 1225 HAMPTON GROSSE POINTE MI 48236		
SDC	MACCAGONE, DAVID T 2701 YACHT CLUB C-4 FT LAUDERDALE FL 33304		
TD	DREWS, MICHAEL W 2701 YACHT CLUB C-4 FT LAUDERDALE FL 33304	PD	DREWS, MICHAEL W 2701 YACHT CLUB C-4 FT LAUDERDALE FL 33304

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.

SIGNATURE: *David Maccagone* **4/24/02** **248-291-1100**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)



DO NOT WRITE IN THIS SPACE