2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # F9700000270 CLAYTON GROUP SERVICES, INC. Principal Place of Business Mailing Address 45525 GRAND RIVER AVE. P.O. BOX 8008 NOVI, MI 48376-8008 US **SUITE #200** NOVI. MI 48374 3. Mailing Address C/O Thelen 2. Principal Place of Business Reid & Priest LLP Suite, Apt. #, etc. Suite, Apt. #, etc. 875 Third Ave., #1433 06282005 Chg-P CR2E034 (10/03) City & State 4. FEI Number Applied For New York, NY 10022 43-0959609 Not Applicable Zip Country Zip 10022 Country \$8.75 Additional 5. Certificate of Status Desired USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NameCorporation Service Company NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 2731 EXECUTIVE PARK DRIVE 1201 Hays Street SUITE 4 WESTON, FL 33331 Tallahassee 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 the obligations of registered pagent. Brian Courtney Asst. V. Pres. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature fill and title if applicable FILE NOW!!! FEE IS'\$ 150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. \Box Due by September 7, 2005 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ¢ Delete CD ☐ Change K Addition TITLE TITLE SCHMITT, ROBERT NAME NAME PIEDELIEVRE, FRANK STREET ADDRESS 45525 GRAND RIVER AVE., #200 STREET ADDRESS 17 BIS, PL DES REFLETS-LA DEFENSE 2 CITY-ST-ZIP NOVI, MI 48374 CITY-\$1-ZIP 92400 COURBEVOIR, FRANCE D Delete TITLE TITLE PCED ☐ Change **X** Addition SAVASTANO, THEODORE NAME NAME WRIGHT, DICKERSON C. 7895 CONVOY CT., #18 STREET ADDRESS 45525 GRAND RIVER AVE., #200 STREET ADDRESS CITY-ST-ZIP NOVI, MI 48374 CITY-ST-7IP PCED ☐ Defete TITLE Change Addition TITLE KASZAR, PHILIP NAME 500057071905 STREET ADDRESS 45525 GRAND RIVER AVE., #200 STREET ADDRESS CITY-ST-ZIP NOVI, MI 48374 CITY-ST-ZIP TD TITLE **VPCF** X Delete TITLE ☐ Change K Addition BERNICE, EDWARD NAME NAME TARDAN, FRANCOIS 17 BIS, PL DES REFLETS-LA DEFENSE 2 STREET ADDRESS 45525 GRAND RIVER AVE., #200 STREET ADDRESS CITY-ST-ZIP NOVI, MI 48374 CITY - ST - ZIP 92400 COURBEVOIE, FRANCE Delete TILLE TITLE ☐ Change Addition VORA, KIRIT HAIMES, BURTON K. 875 THIRD AVE., #1433 NAME NAME STREET ADDRESS 160 FIELDCREST AVE., RARITAN CTR. STREET ADDRESS CITY-ST-ZIP **EDISON, NJ 08837** CITY-ST-ZIP NEW YORK, NY 10022 Delete TITLE EVP ☐ Change Addition FEHLER, RICHARD TONG, RICHARD 11860 W. STATE RD 84, STE. 1 NAME NAME STREET ADDRESS 6920 KOLL CTR. PKWY., SUITE 216 STREET ADDRESS CITY-ST-ZIP PLEASANTON, CA 94566 CITY-ST-ZIP FT. LAUDERDALE, FL 33325 12. 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 10 or Block 11 if

Burton K. Haimes

7-5-05

Date

(212) 603-2060

Daytme Phone #

DOCUMENT #F97000000270

Entity Name: CLAYTON GROUP SERVICES, INC.

Annex to Florida 2005 For Profit Corporation Annual Report

Block 11 - Additional Officers

Title FINANCIAL CONTROLLER
Name DAMASCENO, LUIS CARLOS
Address 11860 W. STATE ROAD 84, STE. 1
FORT LAUDERDALE, FL 33325

Title VICE PRESIDENT Name LYNCH, MARK

Address 11860 W. STATE ROAD 84, STE. 1

FORT LAUDERDALE, FL 33325



ACCOUNT NO. : 072100000032

REFERENCE: 467047

4301893

AUTHORIZATION <:

COST LIMIT

ORDER DATE: July 6, 2005

ORDER TIME : 10:08 AM

ORDER NO. : 467047-005

CUSTOMER NO: 4301893

CUSTOMER: Ms. Barbara Patterson

Thelen Reid & Priest Llp

875 Third Avenue New York, NY 10022

CHANGE OF AGENT

NAME: CLAYTON GROUP SERVICES, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Kelly Courtney