## 2006 FOR PROFIT CORPORATION

## FILED **ANNUAL REPORT** May 02, 2006 08:00 AN Secretary of State DOCUMENT # F97000003217 1. Entity Name **BEZTAK LAND COMPANY** Principal Place of Business Mailing Address 31731 NORTHWESTERN HWY, STE 250W 31731 NORTHWESTERN HWY, STE 250W FARMINGTON HILLS, MI 48334-1654 FARMINGTON HILLS, MI 48334-1654 01112006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 38-2732383 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LUPTAK, PAOLA M 2201 NW CORPORATE BLVD. DO NOT WRITE SUITE 100 IN THIS SPACE BOCA RATON, FL 33431 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 agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be U00000558162 FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Added to Fees Trust Fund Contribution. 05/17/06-80084-001 150.00 10. OFFICERS AND DIRECTORS TITLE NAME BEZNOS, MAURICE STREET ADDRESS 31731 NORTHWESTERN HWY STE 250W CITY-ST-ZIP FARMINGTON HILLS, MI TITLE BEZNOS, NORMAN NAME STREET ADDRESS 31731 NORTHWESTERN HWY STE 250W CITY-ST-ZIP FARMINGTON HILLS, MI TITLE NAME STURING, MARK 31731 NORTHWESTERN HWY STE 250W STREET ADDRESS DO NOT WRITE CITY-ST-73P FARMINGTON HILLS, MI IN THIS SPACE TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TY OR PRINTED NAM F SIGNING OFFICER OR DIRECTOR wina J.

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