

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 19 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F97000003790 (9)**

1. Corporation Name
MASCO ACQUISITION SUBSIDIARY, INC.

Principal Place of Business 21001 VAN BORN RD. TAYLOR MI 48180	Mailing Address 21001 VAN BORN RD. TAYLOR MI 48180
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 515 Big Stone Gap Road Suite, Apt. #, etc.		2a. Mailing Address 26 c/o Tax Department Suite, Apt. #, etc.		3. Date Incorporated or Qualified 07/21/1997	
22 City & State 23 Duncanville, TX		27 City & State 28 Taylor, MI		4. FEI Number APPLIED FOR 38-3363271	
24 Zip 75137		25 Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
29 Zip 48180		30 Country US		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1 TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KENNEDY, RAYMOND			1.2 NAME			
STREET ADDRESS	21001 VAN BORN RD.			1.3 STREET ADDRESS			
CITY-ST-ZIP	TAYLOR MI 48180			1.4 CITY-ST-ZIP			
TITLE	VPD	<input type="checkbox"/> DELETE		2.1 TITLE	VTDAS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MOSTELLER, RICHARD G			2.2 NAME			
STREET ADDRESS	21001 VAN BORN RD.			2.3 STREET ADDRESS			
CITY-ST-ZIP	TAYLOR MI 48180			2.4 CITY-ST-ZIP			
TITLE	VSD	<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GARGARO, EUGENE A JR			3.2 NAME			
STREET ADDRESS	21001 VAN BORN RD.			3.3 STREET ADDRESS			
CITY-ST-ZIP	TAYLOR MI 48180			3.4 CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DORAN, DAVID A			4.2 NAME			
STREET ADDRESS	21001 VAN BORN RD.			4.3 STREET ADDRESS			
CITY-ST-ZIP	TAYLOR MI 48180			4.4 CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HENNESSEY, FRANK M			5.2 NAME			
STREET ADDRESS	21001 VAN BORN RD.			5.3 STREET ADDRESS			
CITY-ST-ZIP	TAYLOR MI 48180			5.4 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		6.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME				6.2 NAME	Charles F. Ladd		
STREET ADDRESS				6.3 STREET ADDRESS	515 Big Stone Gap Road		
CITY-ST-ZIP				6.4 CITY-ST-ZIP	Duncanville, TX 75137		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

David A. Doran 4/28/98 313/274-7400

CR2E034 (10/97)