

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000582

Entity Name: NGS AMERICAN, INC.

FILED  
Feb 28, 2005  
Secretary of State

## Current Principal Place of Business:

27575 HARPER AVE.  
ST. CLAIR SHORES, MI 48081

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 7676  
SAINT CLAIR SHORES, MI 48080

## New Mailing Address:

P.O. BOX 7676  
ST. CLAIR SHORES, MI 48080

FEI Number: 38-2259531

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CCEO ( ) Delete  
Name: ALCOTT, WILLIAM D  
Address: 27575 HARPER AVE.  
City-St-Zip: ST. CLAIR SHORES, MI 48081

Title: P ( ) Delete  
Name: GUNTER, KIMBERLEY A  
Address: 27575 HARPER AVE.  
City-St-Zip: ST. CLAIR SHORES, MI 48081

Title: CFO ( ) Delete  
Name: GRIFFIN, PETER R  
Address: 27575 HARPER AVE.  
City-St-Zip: ST. CLAIR SHORES, MI 48081

Title: V ( ) Delete  
Name: MULCAHEY, SHERRYL  
Address: 27575 HARPER AVE.  
City-St-Zip: ST. CLAIR SHORES, MI 48081

Title: V ( ) Delete  
Name: ELLWOOD, WILLIAM  
Address: 27575 HARPER AVE.  
City-St-Zip: ST. CLAIR SHORES, MI 48081

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: ALCOTT, WILLIAM D  
Address: 27575 HARPER AVE.  
City-St-Zip: ST. CLAIR SHORES, MI 48081

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER R. GRIFFIN

CFO

02/28/2005

Electronic Signature of Signing Officer or Director

Date