2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

F98000001920

1. Entity Name



FILED May 01, 2003 8:00 am \$ Secretary of State

05-01-2003 90261 045 ***150.00

C G & S INVESTORS, INC.										
Principal Place 3400 EAST LA DETROIT MI		3400	ng Address EAST LAFAYETTE ROIT MII 48207							
2. Principal F	Place of Business	3. Mai	iling Address			1 (001100 1110 10101 LOLI) 071		181 1215 1611 1		
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City	City & State			4. FEI Number 38-34030	016		oplied For ot Applicable	
Zip	Country	Zip		Country		5. Certificate of Status Desire		8.75 Add ee Require		
	6. Name and Address of Curi	ent Registere	ed Agent	Nome		7. Name and Address of Ne	w Registered Ag	ent		
O T 0000004710N 0V07714					Name					
C T CORPORATION SYSTEM				Street	Street Address (P.O. Box Number is Not Acceptable)					
1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324										
FUMILATI	ION 1 L 33324			City			FL	Zip Cod	e	
	named entity submits this stateme	nt for the purp	oose of changing its r	registered office	or registere	d agent, or both, in the State o	f Florida. I am fa	miliar with,	and accept	
_										
SIGNATURE .	Signature, typed or printed name of registered a	agent and title if app	olicable. (NOTE:	Registered Agent signs	ature required v	when reinstating)	DATE		\	
F	ILE NOW!!! FEE IS \$150.00									
			í			6 G Election Campaign				
	r May 1, 2003 Fee will be \$550 k Payable to Florida Departmei					9. Election Campaigr Trust Fund Contrib			May Be i to Fees	
	k Payable to Florida Departme		PRS	11.			ution.	Added	i to Fees	
Make Check 10.	k Payable to Florida Departmen OFFICERS A	nt of State	PRS Delete	TITLE	D	Trust Fund Contrib	OFFICERS AND D	Added	i to Fees	
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Make Check 10.	PD SAPUTO, PETER C 3400 EAST LAFAYETTE	nt of State		TITLE	Soave 3400	Trust Fund Contrib ADDITIONS/CHANGES TO Ge, Anthony East Lafayette	OFFICERS AND D	Added	to Fees S IN 11	
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE SIGNATURE AND TY

313.567.7000

Daytime Phone #