2007 FOR PROFIT CÓRPORATION

FILED May 08, 2007 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # F99000005883** 1. Entity Name PALMER GENERAL, INC. Principal Place of Business Mailing Address 31731 NORTHWESTERN HIGHWAY, SUITE 240 31731 NORTHWESTERN HIGHWAY, SUITE 240 FARMINGTON HILLS, MI 48334 FARMINGTON HILLS, MI 48334 CR2E034 (11/05) 01042007 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number **NOT APPLICABLE** Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE LUPTAK, PAOLA M 2201 NW CORPORATE BLVD 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) 9. Election Campaign Financing \$5.00 May Be FiLE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PTD TITLE BEZNOS, MAURICE J NAME STREET ADDRESS 31731 NORTHWESTERN HIGHWAY SUITE 250W CITY-ST-ZIP FARMINGTON HILLS, MI 48334 SD TITLE BENZOS, NORMAN NAME STREET ADDRESS 31731 NORTHWESTERN HIGHWAY SUITE 250W CITY-ST-ZIP FARMINGTON HILLS, MI 48334 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER O