

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Oct 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K29986

(2)

1. Corporation Name

HOMISCO INCORPORATION, INC.

Principal Place of Business

% HONIGMAN MILLER SCHWARTZ AND COHN
222 LAKEVIEW AVE SUITE 800
WEST PALM BEACH FL 33401
US

Mailing Address

% HONIGMAN MILLER SCHWARTZ AND COHN
222 LAKEVIEW AVE SUITE 800
WEST PALM BEACH FL 33401
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/27/1988

4. FEI Number

65-0083284

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 2290 First National Bldg.

Suite, Apt. #, etc.

22 City & State
23 Detroit, MI

Zip

24 48226

Country

25 USA

2a. Mailing Address

26 2290 First National Bldg.

Suite, Apt. #, etc.

27 City & State
28 Detroit, MI

Zip

29 48226

Country

30 USA

9. Name and Address of Current Registered Agent

HONIGMAN, MILLER, SCHWARTZ & COHN
222 LAKEVIEW AVE., #800
W. PALM BEACH FL 33401

Please note attached change of agent filed
June 2, 1998

10. Name and Address of New Registered Agent

81 Name

CT Corporation System

82 Street Address (P.O. Box Number Is Not Acceptable)

1200 South Pine Island Road

83

84 City Plantation

FL

85 Zip Code 33324

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

TITLE PD ☒ DELETE

NAME ROSEN, MARVIN S.
STREET ADDRESS 222 LAKEVIEW AVE., #800
CITY-ST-ZIP W. PALM BEACH FL

TITLE V ☒ DELETE

NAME PARSON, STEVEN R
STREET ADDRESS 222 LAKEVIEW AVE., #800
CITY-ST-ZIP W PALM BCH FL

TITLE S ☒ DELETE

NAME SOBLE, JAMES B.
STREET ADDRESS 2700 SUNTRUST FIN. CENT., 401 E. JACKSON
CITY-ST-ZIP TAMPA FL

TITLE T ☒ DELETE

NAME WORKSAM, E. LEE
STREET ADDRESS 222 LAKEVIEW AVE., SUITE 800
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PTD ☐ Change ☒ Addition

1.2 NAME David Roback
1.3 STREET ADDRESS 2290 First National Building
1.4 CITY-ST-ZIP Detroit, MI 48226

2.1 TITLE SD ☐ Change ☒ Addition

2.2 NAME Michael J. Gable
2.3 STREET ADDRESS 2290 First National Building
2.4 CITY-ST-ZIP Detroit, MI 48226

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(l), 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 Roback

David Roback

9/29/98

(313)465-7012

CR2E034 (5/98)