## 2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## May 11, 2001 8:00 am Secretary of State DOCUMENT # **K29986** 1. Entity Name HOMISCO INCORPORATION, INC. 05-11-2001 90126 018 \*\*\*150.00 Principal Place of Business Mailing Address 2290 FIRST NATIONAL BLDG. 2290 FIRST NATIONAL BLDG. DETROIT MI 48226 DETROIT MI 48226 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEL Number 65-0083284 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code [200] [20] 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Rogistered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 7171.5 PTD Delete TITLE PTD Change **Addition** NAME NAME ROBACK, DAVID REDMAN, THERESA STREET ADDRESS STREET ADDRESS 2290 FIRST NATIONAL BUILDING 2290 FIRST NATIONAL BUILDING CITY-ST-ZIF CITY-ST-ZIP DETROIT MI 48226 DETROIT MI 48226 Delete TITLE Change Addit.on TITLE SD NAMÉ NAME GABLE, MICHAEL J STREET ADDRESS STREET ADDRESS 2290 FIRST NATIONAL BUILDING CITY-ST-ZIP CITY-ST-ZIP DETRIOT MI 48226 Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS C(TY-ST-Z)P CHTY-SI-ZIP ☐ Delete TITLE Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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 undor oath: that I am an officer or cirector of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment, with all other like empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment

HONIGMAN MILLER SCHWARTZ AND COHN LLP

2290 FIRST NATIONAL BUILDING 660 WOODWARD AVENUE DETROIT, MICHIGAN 48226-3583

FAX (313) 465-8000

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L048983 V29986 LANSING, MICHIGAN

BINGHAM FARMS, MICHIGAN

May 1, 2001

## VIA FEDERAL EXPRESS

Florida Department of State Division of Corporation Uniform Business Report Filing 409 East Gaines Street Tallahassee, Florida 32399

Re: HOMISCO Incorporation, Inc.

Dear Sir/Madam:

Enclosed for filing is 2001 Uniform Business Report for the above-referenced corporation, together with our check in the amount of \$150.00 to cover the filing fee.

If you have any questions with regard to this matter, please contact the undersigned by telephone call to (313) 465-7208.

Thank you for your assistance and cooperation.

Very truly yours,

lan & O Den

Gayle C. Aiken Legal Assistant

GCA:chb

Enclosure

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