May 08, 1999 8:00 am Secretary of State

05-08-1999 90023 008 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Mailing Address

C/O PROGRESSIVE TOLL AND IND.

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L52809

1. Corporation Name

Principal Place of Business

C/O PROGRESSIVE TOOL AND IND

SOUTHFIELD CORPORATION

21000 TELEGRAPH RD. SOUTHFIELD MI 48034		21000 TELEGRAPH RD. SOUTHFIELD MI 48034				DO NOT WRITE IN THIS	SPACE			
US		US				3. Date Incorporated or Qualifed 02/22/1990				
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applied For		
21		26	26			58-1903157		Not Applica	ble	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired S8.75 Additional Fee Required				
City & State		City & State				6. Election Campaign Financing	\$5.	00 May Be		
23		28	28			Trust Fund Contribution Added to Fees				
Zip Country		Zip	Zip Country			8. This corporation owes the current year Intangible				
24	25	29	30			Personal Property Tax. Yes No				
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
			8-	1 N	lame					
	ie, edward		82 Street Add			ss (P.O. Box Number is Not Acceptable)				
	PARSON BROWN DR.		"	٦	tioet Addict	SS (F. I.S. BOX Hamber IS Hot / ISSEPTED)		_		
ORLA	NDO FL 32819		83	3						
			84	4 C	ity	FI	85	Zip Code		
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	Signature, typed or printed name of registered age	ent and title if applicable. (NOTE:	Registered Age	ent sig	nature required v	when reinstating) DATE				
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A				
TITLE	D	☐ DELETE	1.1 TITLE				☐ Cha	nge 🗀 Add	lition	
NAME	WISNE, ANTHONY E.		1.2 NAME							
STREET ADDRESS	7724 ORANGE TREE LANE		1.3 STREE	ET ADD	DRESS				l	
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-		,					
TITLE	D	☐ DELETE 2.1 TI		1 TITLE			☐ Cha	nge ∐ Add	dition	
NAME	WISNE, LAWRENCE A.		2.2 NAME	2.2 NAME					ľ	
STREET ADDRESS 2100 TELEGRAPH ROAD			2.3 STREE		DRESS					
CITY-ST-ZIP SOUTHFIELD MI			2.4 CITY		Р	<u></u>				
TITLE	D	☐ DELETE	3.1 TITLE	III TITLE			☐ Cha	nge 🔲 Add	dition	
NAME WINIARSKI, VICTOR A.			3.2 NAME	:						
STREET ADDRESS 2100 TELEGRAPH ROAD			3.3 STREET ADDRESS		ORESS					
CITY-ST-ZIP SOUTHFIELD MI			3.4. CITY		P					
TITLE			4.1 TITLE				Cha	nge 🗌 Add	dition	
NAME	i		4. 2 NAME	E						
STREET ADDRESS			4.3 STREET ADDRESS		DRESS					
CITY-ST-ZIP			4.4 CITY-	4.4 CITY-ST-ZIP						
TITLE		☐ DELETE	5.1 TITLE				Cha	nge 🗌 Ado	lition	
NAME			5.2 NAME							
STREET ADDRESS			5.3 STRE	ET ADO	DRESS					
CITY-ST-ZIP			5.4 CITY-	ST-ZIF	•					
TITLE		☐ DELETE	6.1 TITLE				☐ Cha	nge 🗌 Add	lition	
NAME			6.2 NAME							
OTDEET ADDDEED			6.3 STRE	ET ADI	DRESS					

14. 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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

RED RED ID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James E. Davis, Director of Tax

(14f) 7LP - 2779