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FILED

Jan 29 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 # P04777 (9)

1. Corporation Name  
SANBREEN COMPANY

Principal Place of Business

1000 SOUTH WOODWARD  
BIRMINGHAM MI 48009

Mailing Address

1000 SOUTH WOODWARD  
BIRMINGHAM MI 48009

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/25/1985

2. Principal Place of Business

21 1000 S. Old Woodward Ave.

Suite, Apt. #, etc.

22 Suite 201

City & State

23 Birmingham, Michigan

Zip

24 48009-6796

Country

25 U.S.A.

2a. Mailing Address

26 1000 S. Old Woodward Ave.

Suite, Apt. #, etc.

27 Suite 201

City & State

28 Birmingham, Michigan

Zip

29 48009-6796

Country

30 U.S.A.

4. FEI Number

38-2174805

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

9. Name and Address of Current Registered Agent

JOSEPH SAVIN  
3316 GRIFFIN ROAD  
FORT LAUDERDALE FL 33312

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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, 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 RIVKIN, BERNARD  
STREET ADDRESS 1000 SOUTH WOODWARD  
CITY-ST-ZIP BIRMINGHAM MI

TITLE SD ☐ DELETE

NAME SAVIN, JOSEPH  
STREET ADDRESS 1000 SOUTH WOODWARD  
CITY-ST-ZIP BIRMINGHAM MI

TITLE YD ☐ DELETE

NAME MUNCY, WILMA  
STREET ADDRESS 1000 SOUTH WOODWARD  
CITY-ST-ZIP BIRMINGHAM MI

TITLE ☐ DELETE

NAME  
STREET ADDRESS

CITY-ST-ZIP

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 ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 1000 S. Old Woodward Ave., Suite 201  
1.4 CITY-ST-ZIP Birmingham, MI 48009-6796

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 1000 S. Old Woodward Ave., Suite 201  
2.4 CITY-ST-ZIP Birmingham, MI 48009-6796

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS 1000 S. Old Woodward Ave., Suite 201  
3.4 CITY-ST-ZIP Birmingham, MI 48009-6796

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)(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.

SIGNATURE: *Wilma Muncy*

Wilma Muncy 01/19/98

248-647-3250

Daytime Phone # 0501452

CR2E034 (10/97)