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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

FILED									
Mar 24 1998 8:00am									
Secretary of State									

FARBIV	ian group of Florida, i	NC.						era i alaki sesan s	ilali Biais Bibi	(L 01816 1881
Principal Plac	e of Business	Mailing	g Address				B CANDINAL CON TITUL TIMIN TOTAL TONNY I	(O) D(O)( 3101) 3		1 91911 1881
	IWESTERN HWY.		NORTHWESTERN	HWY.						
4TH FLOOR 4TH FLOOR SOUTHFIELD MI 48034 SOUTHFIELD MI 48034							DO NOT WRITE IN THIS SPACE			
US US					3. Date Incorporated or Qualified				AUL	
							10/31/1990			
2. Principal P	2. Principal Place of Business 2a. Mailing Address				4. FEI Number				Ap	plied For
21		26					38-2944440		No	t Applicable
Suite, Apt.	#, etc.	Sui	Suite, Apt. #, etc.			<b>5.</b> C	Certificate of Status Desired		\$8.75	
22		27						<del></del>	Fee Re	<del></del>
City & Stat	e		City & State				lection Campaign Financing		\$5.00 Added to	
Zip	Country	28 Zip		Coun	lrv		rust Fund Contribution his corporation owes or has p			
24	25	29		30	,		riis corporation owes of has p rersonal Property Tax due June			No Subipie
	9. Name and Address of Curren		d Agent	1001			lame and Address of New R			
CŁ	INTON, TOM-				1 Name					
	29 NW 99RD AVENUE, BLDG 5			-	C T Street	CORPOR	RATTON SYSTEM  D. Box Number is Not Accepta	thie)		
<del>B</del> U	9 <del>0. 5</del>			Ľ		CTO	RPORATION SYSTEM	M		
FT-LAUDERDALE: FL 33309				ε	120		PINE ISLAND RO	תא		
				E	4 City				85 Zip C	Code
					l Dĭ.Δ	NITATION	<u> </u>	<u>FL</u>	33.	324
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig.	2 and 607.1 of Florida. S	508, Florida <b>Sta</b> tu Such change was	ites, the abo authorized	ove-named by the corp	l corporation s poration's boa	submits this statement for the ard of directors. I hereby acce	purpose of o opt the appo	changing its intment as	s registered   registered
agent. I a	lorida Statu	es.	Maria at	TTTTD	3/12/	/00	_			
SIGNATURE	Signature typed or printed name of registered age	4	Lashie (NO)	TC Desistered		C A. GI		DATE	<del>9</del> 0	
12.	OFFICERS AN			13.	gent algnature	ΔΠ	DITIONS/CHANGES TO DEEL	CERS AND	DIRECTOR	S IN 12
TITLE	<b>X</b> ->		DELETE	1.1 TITL		JEVEOUS	TIVE VICE PLE BERG, WILLIAM	EVICAT	Change	Addition
NAME	EISENBERG, WILLIAM			1.2 NAM	E	LISEA	BERG WILLIAM	,	•	
STREET ADDRESS	28400 NORTHWESTERN HWY	/., 4TH FLO	OOR	1.3 STRI	ET ADDRESS	(SAM	-\			
CITY-ST-ZIP	SOTHFIELD MI			14 City	-ST-ZIP	CSAM	<i>e)</i>			
TITLE			☐ DELETE	2.1 TITL				Į	Change	Addition
NAME	STROUD, DOUGLAS R.	, , , , , , , , , ,	200	2.2 NAM	E					
STREET ADDRESS	28400 NORTHWESTERN HWY	r., 41H FL	JUK	2 3 STRI	et address					
CITY-ST-ZIP	SOUTHFIELD MI				′-ST-Z(P			<del></del>	* ******	T Addition
TITLE	CSD EADDMAN PLIDTON D		☐ DELETE	3.1 TITL				ı	Change	☐ Addition
NAME	FARBMAN, BURTON D. 28400 NORTHWESTERN HWY	/ ATH EL	)OR	3.2 NAM			•			
STREET ADDRESS	SOUTHFIELD MI	14 THE	JUN		ET ADDRESS					
CITY-ST-ZIP TITLE	SOUTH ICLU MI		DELETE	3.4. CITY 4.1 TITLE	'-ST-ZIP	PRes 10	vs. T		Change	Addition
NAME	WILLIAMS, HEDLEY J		- Decemb	4.1 III G					vivilgo	- Tadition
STREET ADDRESS	28400 NORTHWESTERN HWY	/ 4TH FLO	OOR		ET ADDRESS	WILLIA	MS, HEOLEY J	•		
CITY-ST-ZIP	SOUTHFIELD MI	<del>-</del>	-	4.5 STR	ET ADDITEOS	(SAME				
TITLE	<del></del>	<del> </del>	DELETE	5.1 TITU		1017	<del></del>	1	Change	Addition
NAME	CLINTON, THOMAS		• •	5.2 NAM				_	•	1
STREET ADDRESS	5229 NW 33RD AVE., BLDG.	<del>5</del>			ET ADDRESS	1				
CITY-ST-ZIP	FT. LAUDERDALE FL			5.4 CITY						[
TITLE			DELETE	6.1 TITU				[	Change	Addition
NAME				6.2 NAM	E	1				
STREET ADDRESS				6.3 STRE	et address					
CITY-ST-ZIP				6.4 CITY						
44 I horoby c	artifu that the information cumplind w	ith thic filing	done not qualify f	or the even	intion etate	od in Section :	110 07/3Vi) Florida Statutas 1	I further cod	itu that tha	information

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.