## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 07, 2005 08:00 AM Secretary of State

AMNOAL KEPOKI				0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
1. Entity Na	JMENT # P34553 me AMATO CORP.			Secretary of State	
Principal Pia	ice of Business	Mailing Address	·		
79 ALFRED		79 ALFRED STREET			
DETROIT, M	¶ 48201	DETROIT, MI 48201			
		***			
DO NOT WRITE IN THIS SPACE				01062005 No Chg-P CR2E034 (10/03)	
				4. FEI Number Applied For	
				38-2975514 Not Applicable	
				5. Certificate of Status Desired \$8.75 Additional	
	& Name and Address of Current D.	relationed Agent	and the second	Fee Required	
	6. Name and Address of Current Ro	Allerator Wallit	<del> </del>		
CT CORPORATION SYSTEM				DO NOT WRITE	
1200 S. PINE ISLAND ROAD				DO MOI MULLE	
PLANTATION, FL 33324		ĺ	IN THIS SPACE		
		<u></u>		No. of the last was a second of the last was a	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
Signature, typed or printed name of registered agent and title if epolicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
FILE NOW!!! FEE 18 \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.					
10.	— OFFICERS AND DI	RECTORS			
TITLE	P/D				
NAME STREET ADDRESS	ENGLISH, FRANK 908 COLEMAN A. YOUNG MUNIC	IDAL CENTED		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
CITY-SI-ZIP	DETROIT, MI 48226	IF AL CENTER		EED LO DOOR	
TITLE	VPD			FEB   0 2005	
NAME	FAIRWEATHER, WILLIAM			,	
STREET ADDRESS		IPAL CENTER		110000000 4400	
CITY-ST-ZIP	DETROIT, MI 48226	<u></u>		U00000254180 03/07/05-80064-011 150.00	
TITLE	SD BANDEMED MARTY	,	Į.	00001000 00004_011 100"AR	
NAME STREET ADDRESS	BANDEMER, MARTY 908 COLEMAN A. YOUNG MUNIC	PAL CENTER	Ĭ		
CITY-S1-ZIP	DETROIT, MI 48226			DO NOT WRITE	
TITLE	TO	-		IN THIS COACE	
NAME	ISOM, LAURĀ			IN THIS SPACE	
STREET ADDRESS	908 COLEMAN A. YOUNG MUNICI	PAL CENTER		1	
CITY-\$T-ZIP	DETROIT, MI 48226	· · · · · · · · · · · · · · · · · · ·		·	
TITLE NAME	1				
STREET ADDRESS	1				
CITY - ST - ZIP				A CONTRACT VALUE OF THE STATE O	
TITLE					
NAME	)				
STREET ADDRESS CITY-ST-ZIP				ļ	
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indicated	on this report or supplemental report is tru	s ming coes not quality for the exen le and accurate and that my signati	ure shall have the sa	ame legal effect as if made under oath; that I am an officer or director	
12. 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 report or supplemental 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 receivery or trustee, employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed or on an attachment with an address. With all other like employered.					