## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000058003

DDOOLIEGT ALIOON, INC

RANDALL, PATRICK

ANN ARBOR, MI 48106

777 EISENHOWER PARKWAY, PO BOX 1346

Name:

Address:

City-St-Zip:

FILED May 08, 2007 Secretary of State

Entity Nai	me: PROQU	JEST ALISON, I	NC.							
Current Principal Place of Business:					New Principal Place of Business:					
400 SOUT SUITE 100 STUART,		I STREET US			2801 80TH KENOSHA		3 US			
Current Mailing Address:					New Mailing Address:					
400 SOUT SUITE 100 STUART,		I STREET US			2801 80TH KENOSHA		3 US			
FEI Number:	: 59-3258421	FEI Number A	Applied For ( )	FEI Num	ber Not Appl	icable ( )	Certifica	ate of Status	Desired ( )	
Name and	Address of	Current Regis	tered Agent:		Name and	Address o	of New Reg	jistered Ag	ent:	
1200 SOU PLANTATI	PORATION S TH PINE ISL ION, FL 3332	AND RD. 24 US	atement for the p	ourpose of	changing if	ts registere	d office or ı	registered a	gent, or both.	
	e of Florida.	,	<b>,</b> -			· - <b>3</b>		- <b>G</b>	9,	
SIGNATU										
	Electro	onic Signature c	f Registered Age	ent				Date		
		193(2)(b), F.S., the ing Trust Fund Co	corporation did no	t receive th	ne prior notic	e.				
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS					
Title: Name: Address: City-St-Zip:	WYSZKOWS	( ) Delete KI, ANDREW SS LAKES PARKW OH 44286	AY		Title: Name: Address: City-St-Zip:	D, P SIDDONS, N 2801 80TH KENOSHA,	STREET	( ) Addition		
Title: Name: Address: City-St-Zip:	SARRATT, RI	OWER PARKWAY,	PO BOX 1346		Title: Name: Address: City-St-Zip:	VP BARACZ, JE 2801 80TH KENOSHA,	STREET	( ) Addition		
Title: Name: Address: City-St-Zip:	BUCHARDT,	OWER PARKWAY,	PO BOX 1346		Title: Name: Address: City-St-Zip:	AS JACOBS, M 2801 80TH KENOSHA,	STREET	( ) Addition		
Title:	Т (	) Delete			Title:	Т	(X) Change	( ) Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

KOSTRZEWA, JEFFREY

2801 80TH STREET

KENOSHA, WI 53143

SIGNATURE: JEFFREY KOSTRZEWA 05/08/2007 Τ