

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003418

Entity Name: MARKET STRATEGIES, INC.

Current Principal Place of Business:

17430 COLLEGE PARKWAY
LIVONIA, MI 48152

Current Mailing Address:

17430 COLLEGE PARKWAY
LIVONIA, MI 48152

FEI Number: 38-2882316

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name GIROUX, PHILIP
Address 17430 COLLEGE PARKWAY
City-State-Zip: LIVONIA MI 48152

Title CHAIRMAN, CEO, SECRETARY
Name MORRISON, ANDREW
Address 17430 COLLEGE PARKWAY
City-State-Zip: LIVONIA MI 48152

Title DIRECTOR
Name HICKMAN, TRENT
Address 17430 COLLEGE PARKWAY
City-State-Zip: LIVONIA MI 48152

Title DIRECTOR
Name BROWN, JANICE
Address 17430 COLLEGE PARKWAY
City-State-Zip: LIVONIA MI 48152

Title DIRECTOR
Name RUSSELL, CHRIS
Address 55 EAST 52ND STREET
 PARK AVENUE PLAZA 33RD FLOOR
City-State-Zip: NEW YORK NY 10055

Title DIRECTOR
Name STEVENSON, JEFFREY
Address 55 EAST 52ND STREET
 PARK AVENUE PLAZA 33RD FLOOR
City-State-Zip: NEW YORK NY 10055

Title PRESIDENT
Name SAUTER, MELISSA
Address 17430 COLLEGE PARKWAY
City-State-Zip: LIVONIA MI 48152

Title COO
Name MUNDORF, TODD
Address 17430 COLLEGE PARKWAY
City-State-Zip: LIVONIA MI 48152

I hereby 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 all other like empowered.

SIGNATURE: ANDREW MORRISON

SECRETARY

04/20/2017

Electronic Signature of Signing Officer/Director Detail

Date