

03101999-90134-030-\$150.00-\$150.00

FILED  
Mar 10, 1999 8:00 am  
Secretary of State

03-10-1999 90134 030 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F93000000109**  
 1. Corporation Name  
**TR AVENUES CORP.**

Principal Place of Business 541 N FAIRBANKS CT STE 1800 CHICAGO IL 60611 US	Mailing Address 541 N FAIRBANKS CT STE 1800 CHICAGO IL 60611 US
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21. Principal Place of Business State, Apt. #, etc.	22. Mailing Address State, Apt. #, etc.
23. City & State	24. City & State
25. Zip Country	26. Zip Country

9. Name and Address of Current Registered Agent

**MILLER, MARK ESQ  
 RUDNICK & WOLFE  
 101 EAST KENNEDY BOULEVARD, SUITE 2000  
 TAMPA FL 33602**

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: Christine A. Bay DATE: 4/16/99

72. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHWARTZ, ROBERT	1.2 NAME	
STREET ADDRESS	541 N FAIRBANKS CT STE 1800	1.3 STREET ADDRESS	
CITY-STATE-ZIP	CHICAGO IL	1.4 CITY-STATE-ZIP	
TITLE	VS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIRINCICH, MARK	2.2 NAME	
STREET ADDRESS	541 N FAIRBANKS CT STE 1800	2.3 STREET ADDRESS	
CITY-STATE-ZIP	CHICAGO IL	2.4 CITY-STATE-ZIP	
TITLE	VAS	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AULT, DANIEL B	3.2 NAME	
STREET ADDRESS	541 N FAIRBANKS CT STE 1800	3.3 STREET ADDRESS	
CITY-STATE-ZIP	CHICAGO IL	3.4 CITY-STATE-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-STATE-ZIP		4.4 CITY-STATE-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-STATE-ZIP		5.4 CITY-STATE-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-STATE-ZIP		6.4 CITY-STATE-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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, with all other filers empowered.

SIGNATURE: Mark R. Kirincich  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**01/08/1993**

4. FEI Number  
**36-3908645**

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 the current year intangible Personal Property Tax.  Yes  No

10. Name and Address of New Registered Agent

81 Name  
**Christine A. Bay**

82 Street Address (P.O. Box Number is Not Acceptable)  
**Rudnick & Wolfe**

83 **101 East Kennedy Boulevard, #2000**

84 City State Zip Code  
**Tampa FL 33602**

CR2ED34 (1/98)

1/21/99 3/17/99-0126  
DATE DATE