

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

FILED

**May 19 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000005754 (7)
1. Corporation Name
RBG VIII CORP.



Principal Place of Business: SUITE 250, 154 WEST HUBBARD, CHICAGO IL 60610
Mailing Address: SUITE 250, 154 WEST HUBBARD, CHICAGO IL 60610

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 154 W Hubbard, Ste. 250, Chicago, IL, 60610
2a. Mailing Address: 26 154 W Hubbard, Ste. 250, Chicago, IL, 60610

3. Date Incorporated or Qualified: 12/20/1993
4. FEI Number: 36-3920452
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 or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent: THE PRENTICE-HALL CORPORATION SYSTEM, INC., 1201 HAYES ST., STE. 105, TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent: B1 Name, B2 Street Address, B3, B4 City, B5 Zip Code (FL)

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: Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	CV	<input type="checkbox"/> DELETE
NAME	BLOCK, BRUCE H	
STREET ADDRESS	154 WEST HUBBARD, SUITE 250	
CITY-ST-ZIP	CHICAGO IL 60610	
TITLE	VCS	<input type="checkbox"/> DELETE
NAME	ROSS, ROBERT S	
STREET ADDRESS	154 WEST HUBBARD, SUITE 250	
CITY-ST-ZIP	CHICAGO IL 60610	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	GOLDFINE, ROBERT S	
STREET ADDRESS	154 WEST HUBBARD, SUITE 250	
CITY-ST-ZIP	CHICAGO IL 60610	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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.

SIGNATURE: Roberts, Ross
4-21-98 (312) 4-0100

CR2E034 (10/97)