FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

F95000002458 (6)

Principal Place of Business Mailing Address 154 WEST HUBBARD STREET 154 WEST HUBBARD STREET SUITE 250 CHICAGO IL 80610 CHICAGO IL 80610					3. Date Incorporated or Qualified 3a. Date of Last Report		
					05/19/1995		·
2. Principal Pla	W 11 A	2a. Mailing Address 26		•	4. FEI Number APPLIED FOR 36-40	17801	Applied For Not Applicable
22	27		uite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Crity & State	City & State City & State 28				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 7:p Co 25 29 30 9. Name and Address of Current Registered Agent		Countr 30	у	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
	9. Name and Address of Curre	ent Hegistered Agent	81	Name	10. Name and Address of New Re	gistered Agent	
	CE HALL LEGAL & FINANCIAL NYS STREET	SERVICES	82		iress (P.O. Box Numiber is Not Acceptable	n)	
TALLAHASSEE FL 32301			83				
			84	City		FL 85	Zıp Çode
SIGNATURE	n, and accept the bullgations of, sec Squaton, bredscriptifed has estrapeteral aga	olum 607.0005, Florida Statutes	TE - Flogrational A _{st} o		ration submits this statement for the purp and of directors. Thereby accept the appo	DÄ'I	
TIFLE	PVC OFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	
NAME STREET ADORESS CHY+ST-ZIP	GOLDFINE, ROBERT S 154 WEST HUBBARD, SUIT CHICAGO IL 60610	_	1.2 NAME 1.3 STREE	T ADDRESS		E.J Chan	ige [] Asonon
THLE	CV	DELETE	1.4 CITY - 2 1 TITLE			☐ Char	nge 🗍 Addition
NAME	BLOCK, BRUCE H		2.2 NAME				
STREET ADDRESS	154 WEST HUBBARD, SUIT CHICAGO IL 60610	E 250		T ADDRESS			
CITY-ST-ZIP TITLE	SD SD	☐ DELETE	2.4 CITY -	ST - ZIP		☐ Char	ige 🗍 Addition
NAME STREET ADDRESS	ROSS, ROBERT S 154 WEST HUBBARD, SUIT CHICAGO IL 60610		3.2 NAME 3.3 STREE	T ADDRESS		[] Gra	ge 🔲 Addinon
CITY-ST-ZIF TITLE	CHONGO IL 000 IU	DELETE	3.4 CITY -	S1 - ZiP		☐ Chan	ge
NAME		u	4.2 NAME				a. [] nagition
STREET ADDRESS			43 STREE	f AUDRESS			
CITY-ST-ZIP		F) Errere	4.4 Crty-:	ST - ZIP		***	
TUTLE NAME		DELETE	5 1 TITLE			Chan	ige 🔲 Addition
STREET ADDRESS			5.2 NAME 5.3 STREE	I ADDRESS			
CITY-ST-ZIP			5.4 CHY-1				
TITLE		☐ DELETE	6 1 TITLE	21 ZII		☐ Chan	ge 🔲 Addit-on
NAME			6.2 NAME			_	-
STREET ADDRESS			63S!HEF	ADDRESS			
oath; that I	the information indicated on this and am an officer or director of the corp	iual report or supplemental annu Oration or the receiver or trustee	ial report is tri empowered	s not qualify f	or the exemption stated in Section 119.0 ate and that my signature shall have the si is report as required by Chapter 607, Flor	ause logal offoct (se if mode under
appears in	Block 12 or Block 13 ff changed, or	ori ar attachment with an addre	9\$S.		4/10/96	Devine thi	