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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Wortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9600000956 (0)

855 W GOOD HOPE RD MILWAUKEE WI \$2239  3. Date incorporated or Qualified O2/26/1986  2. Principal Place of Eusiness O2/26/1986  2. Principal Place of Eusiness O2/26/1986  2. Principal Place of Eusiness O2/26/1986  3. Date incorporated or Qualified O2/26/1986  4. FEI Number O2/26/1986  5. Certificate of Status Desired O2/26/23/223 Nor Applicable O2/26/23/23/23 Nor Applicable O2/26/23/23/23 Nor Applicable O2/26/23/23/23/23/23/23/23/23/23/23/23/23/23/	IRICU	H DIRECT, INC.				
Section   Sect	Principal Pla	nce of Business	Mailing Address		A ICAMAN WIS COILD BINN DOWN TOUR DOWN	I BORK KOKI ODIN IDIHI DIKU DIKI 1901
22   Principal Place of Elusiness   2a   Mailing Address   4. FEI Number   Applied For   Not Applied						
20 THOMPSON ROAD   26   South Apt #, etc.					•	3a. Date of Last Report
Suito, April #, etc.    Suito, April #, etc.	י אכי דייל		h1		1	Applied For
City & State   City & State   City & State   City & State	<u>  •     </u>				52-1234223	
Second Company   Second   Se		d. W. Eller	F1		5. Certificate of Status Desired	1 1 '
Country   Zip   Country   Zip   Country   State   St	City & Str		City & State	····	1	\$5.00 May Be
9. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  82 Street Address (P.O. Box Number is Not Acceptable)  83 B4 City  FL B5 Zip Code  11. Pursiter I 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 of 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, 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, 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 mile application of colorida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I mile application's board of directors. I hereby accept the appointment as registered agent. I mile application of the provisions of Registered Agent application of the provisions of Registered Agent application's board of directors. I hereby accept the appointment as registered agent. I mile application's board of directors. I hereby accept the appointment as registered agent. I mile application's board of directors. I hereby accept the appointment as registered agent. I mile application's board of directors. I hereby accept the appointment as registered agent. I mile application's board of directors. I hereby accept the appointment as registered agent. I mile application's board of directors. I hereby accept the appointment as registered agent. I mile application's board of directors. I hereby accept the appointment as registered agent. I mile application's board of directors. I hereby accept the appointment as registered agent. I mile application's board of directors. I hereby accept the appointmen	Zip		Zip	Country	8. This corporation has liability for i	intangible tax under s. 199.032,
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324  82 Street Address (P.O. Box Number is Not Acceptable)  83   84   City	24 0640	- 23		30	Florida Statutes	Yes 🚹 No
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 ram familiar with, and accept the obligations of, Soction 607,0505, Florida Statutes.  SIGNATURE  12.			nt Registered Agent	R1 Nome	10. Name and Address of New Re	gistered Agent
PLANTATION FL 33324  83  84 City FL   85 Zip Code  11. Pursiant 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 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, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent in familiar with, and accept the obligations of, Socion 607/3505, Florida Statutes.  SIGNATURE  SIGNATURE  12.				oi Name		
B3   B4   City				82 Street Addr	ress (P.O. Box Number is Not Acceptab	ole)
11. Pursitant 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 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, and face pit the obligations of Section 607.0505. Florida Statutes.  SIGNATURE	PL	ANIAHON FL 33324		83	· · · · · · · · · · · · · · · · · · ·	
11. Pursitant 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 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, and face pit the obligations of Section 607.0505. Florida Statutes.  SIGNATURE						
11. Pursided 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 officer 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. Tam familiar with, and accept the obligations of, Socion 607 0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12.  OF FICERS AND DIRECTORS	ĺ			84 City		85 Zip Code
Addition    Comparison   Compar	11. Pursuar	of to the provisions of Sections 607 050	2 and 607.1508, Florida Statutes	s, the above-named corp	poration submits this statement for the p	urnose of changing its registered
SIGNATURE    State   Special part   p	office or agent. I	r registered agent, or both, in the State , am familiar with, and accept the oblig	e of Florida. Such change was au alions of, Section 607,0505. Flor	ithorized by the corporati ida Statutes.	tion's board of directors. I hereby accep	ot the appointment as registered
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DCV	_					
DELETE		Digration. Typed of porteo name of registered ag-		· _ · · · · · · · · · · · · · · · · · ·		
NAME   HUDSON, KATHERINE M   12 NAME   13 STREET ADDRESS   14 CITY-ST-ZIP	<u> </u>				ADDITIONS/CHANGES TO OFFIC	
SIRELADDRESS CITY ST. 7P MILWAUKEE WI 53233  DELUCA, DONALD P SIRELADDRESS CITY ST. 2P  DELUCA, DONALD P SIRELADDRESS CITY ST. 2P  MILWAUKEE WI 53233  DELUCA, DONALD P SIRELADDRESS CITY ST. 2P  MILWAUKEE WI 53233  DELETE  DS DS DELETE 3.1 TITLE DS LETTENBERGER, PETER J 3.2 NAME SIRELADDRESS CITY ST. 2P MILWAUKEE WI 53202  MILWAUKEE WI 53202  JA CITY ST. 2P  MILWAUKEE WI 53203  JA CITY ST			L] DELETE			LE Change LE Addition
DELETE   D		1				
DELUCA, DONALD P  STREET ADDRESS CITY: ST-ZAP  MILWAUKEE WI 53233  DELETE  DELETE  DELETE  21 TITLE  VICE PRESIDENT & CFO  FRANK JAEHNERT  6555 W. GOOD HOPE ROAD  MILWAUKEE WI 53233  DELETE  3.1 TITLE  LETTENBERGER, PETER J  3.2 NAME  STREET ADDRESS CITY: ST-ZIP  MILWAUKEE WI 53202  MILWAUKEE WI 53202  DELETE  4.1 TITLE  P  DELETE  4.1 TITLE  FISK, RICHARD L  PO BOX 1331  NEW HAVEN CT 06505  DELETE  21 TITLE  VICE PRESIDENT & CFO  FRANK JAEHNERT  6555 W. GOOD HOPE ROAD  MILWAUKEE, WI 53233  Change Addition  Addition  FRANK JAEHNERT  6555 W. GOOD HOPE ROAD  MILWAUKEE, WI 53233  Change Addition  Addition  FRANK JAEHNERT  6555 W. GOOD HOPE ROAD  MILWAUKEE, WI 53233  Change Addition  ADDITIO						
DELUCA, DONALD P  STREET ADDRESS CITY: STI-ZP  MILWAUKEE WI 53233  DELETE  DEL			DELETE	44 7070	OT DESCRIPTION A OTO	K Change Addition
SIREET ADDRESS CITY: ST-ZP MILWAUKEE WI 53233 DS DELETE NAME LETTENBERGER, PETER J STREET ADDRESS CITY: ST-ZP MILWAUKEE WI 53233 DELETE 3.1 TITLE NAME STREET ADDRESS CITY: ST-ZP MILWAUKEE WI 53233 Change Addition LETTENBERGER, PETER J 3.2 NAME 3.3 STREET ADDRESS MILWAUKEE WI 53202 3.4 CITY: ST-ZIP MILWAUKEE WI 53202 Thompson Road LETTENBERGER, PETER J 4.1 TITLE P FISK, RICHARD L PO BOX 1331 A3 STREET ADDRESS CITY: ST-ZIP STREET ADDRESS CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP MILWAUKEE, WI 53233 Change Addition LETTENBERGER, PETER J A4 CITY: ST-ZIP A4 CITY: ST-Z	NAME	•	<del></del>	AT(		
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STREET ADDRESS   STRE	TITLE		DELETE		DWAUKEEY WI 53233	Change Addition
MiLWAUKEE WI 53202   34 CITY-ST-ZIP	NAM:			3.2 NAME		İ
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RAME   FISK, RICHARD L   4.2 NAME						
STHEET ADDRESS   PO BOX 1331   4.3 STREET ADDRESS   20 Thompson Road	THE		L DELETE	4.1 TITLE		Change Addition
CITY - ST - 24P NEW HAVEN CT 06505 44 CITY - ST - 21P Branford . CT 06405						
	[			4.3 STREET ADDRESS 2	0 Thompson Road	
(iii)   I Chaixia   Fatitie   Fatitie   I Chaixia   Fatitie		NEW HAVEN CT 06505			ranford, CT 06405	
			☐ DECETE	5.1 TITLE		Change Addition
NAME 5.2 NAME				1		
SIGELATORISS 5.3 STREET ADDRESS CHR. D. 46				<b>I</b>		
CRY ST 20			DELETE			Charge Addition
NAME 6.2 NAME			hand Property			C overdo C voquion
STREET ADDRESS 6.3 STREET ADDRESS		,				

**SIGNATURE:** 

appears in Block 12 or Block 13 if changed, or on an attaching

14. I do 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 apport as required by Chapter 607, Florida Statutes; and that my name

VICE PRESIDENT & CONTROLLER

(414) 358=6600

**FILED** 

Apr 22 1997 8:00am

Secretary of State