

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 08:00 AM
Secretary of State

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Entity Name
 MIDAS INTERNATIONAL CORPORATION

Principal Place of Business
 300 ARLINGTON HEIGHTS ROAD
 ASCA, IL 60143

Mailing Address
 1300 ARLINGTON HEIGHTS ROAD
 ITASCA, IL 60143



01042006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
 36-1265336 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 T CORPORATION SYSTEM
 200 SOUTH PINE ISLAND ROAD
 LANTATION, FL 33324

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

000000387032
 01/19/06-80023-002 150.00

OFFICERS AND DIRECTORS	
CE OFFICER	CEO FELDMAN, ALAN D 1300 ARLINGTON HEIGHTS ROAD ITASCA, IL 60143
CE OFFICER	VPT MATRE, DAVID W 1300 ARLINGTON HEIGHTS ROAD ITASCA, IL 60143
CE OFFICER	DCFO GUZIK, WILLIAM M 1300 ARLINGTON HEIGHTS ROAD ITASCA, IL 60143
CE OFFICER	DS MARR, ALVIN K 1300 ARLINGTON HEIGHTS ROAD ITASCA, IL 60143
CE OFFICER	AC KUNTSMAN, MICHAEL 1300 ARLINGTON HEIGHTS RD. ITASCA, IL 60143
CE OFFICER	

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Michael E. Kuntzman SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: 1/17/2006
 Daytime Phone #: 630-438-3055