2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F97000003204

City-St-Zip:

HINSDALE, IL 60521

Entity Name: ENTERPRISE RECOVERY SYSTEMS INC.

FILED Apr 30, 2002 8:00 AM Secretary of State

Littly Nai	IIIE. ENTERF	RISE RECOVERT STSTEIVIS	, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
2400 SOU	TH WOLF RO	AD					
STE. 200		154					
VVESTOR	ESTER, IL 60°	104					
Current M	lailing Addres	ss:	New Maili	ng Addres	s:		
STE. 200	TH WOLF RO						
WESTCH	ESTER, IL 60°	154					
FEI Number:	: 36-3594864	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired (X)		
Name and	Address of C	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1200 SOU	PORATION SY TH PINE ISLA ION, FL 33324	ND RD.					
The above in the State	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registere	ed office or registered agent, or both,		
SIGNATU	RE:						
	Electror	nic Signature of Registered Ag	jent		Date		
Election Car	mpaign Financin	o satisfy its Intangible Tax filing re g Trust Fund Contribution().					
OFFICER	S AND DIREC	TORS:	ADDITION	S/CHANG	ES TO OFFICERS AND DIRECTORS	÷	
Title: Name: Address: City-St-Zip:	P (TORNATORE, 5799 S. GRAN HINSDALE, IL	Γ	Title: Name: Address: City-St-Zip:	P TORNATOF 5801 S. GR HINSDALE,	RANT		
Title: Name: Address: City-St-Zip:	BASSETT, JEF 4813 STANLEY		Title: Name: Address: City-St-Zip:		() Change () Addition		
Title: Name: Address:	S () TORNATORE, I 5799 S. GRAN		Title: Name: Address:	S TORNATOR 5801 S. GR	,		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

HINSDALE, IL 60521

SIGNATURE: SAM TORNATORE PRES 04/30/2002