

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003204

FILED  
Jan 17, 2005  
Secretary of State

Entity Name: ENTERPRISE RECOVERY SYSTEMS, INC.

## Current Principal Place of Business:

2400 SOUTH WOLF ROAD  
STE. 200  
WESTCHESTER, IL 60154

## New Principal Place of Business:

## Current Mailing Address:

2400 SOUTH WOLF ROAD  
STE. 200  
WESTCHESTER, IL 60154

## New Mailing Address:

FEI Number: 36-3594864

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD.  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: TORNATORE, SAM  
Address: 5801 S. GRANT  
City-St-Zip: HINSDALE, IL 60521

Title: V ( ) Delete  
Name: BASSETT, JEFF  
Address: 4813 STANLEY  
City-St-Zip: DOWNERS GROVE, IL 60525

Title: S ( ) Delete  
Name: TORNATORE, SAM  
Address: 5801 S. GRANT  
City-St-Zip: HINSDALE, IL 60521

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: SAM TORNATORE

PRES

01/17/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date