


2006 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # F97000006939
 1. Entity Name
AMERICAN LABELMARK COMPANY



Principal Place of Business
5724 N. PULASKI
CHICAGO, IL 60646

Mailing Address
5724 N. PULASKI
CHICAGO, IL 60646



01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-3484503 Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

000000388331
 01/19/06-80074-016 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CURTIS, DWIGHT
STREET ADDRESS	5724 N. PULASKI
CITY-ST-ZIP	CHICAGO, IL 60646
TITLE	COBC
NAME	MOSTOW, GARY S
STREET ADDRESS	161 N. CLARK STREET, SUITE 3100
CITY-ST-ZIP	CHICAGO, IL 60601
TITLE	ST
NAME	SCHOEN, ALAN
STREET ADDRESS	5724 N. PULASKI
CITY-ST-ZIP	CHICAGO, IL 60646
TITLE	D
NAME	CURTIS, DWIGHT
STREET ADDRESS	5724 N. PULASKI
CITY-ST-ZIP	CHICAGO, IL 60646
TITLE	D
NAME	MCFARLAND, ROBERT
STREET ADDRESS	5724 N. PULASKI
CITY-ST-ZIP	CHICAGO, IL 60646
TITLE	D
NAME	DANZIG, HAROLD
STREET ADDRESS	5724 N. PULASKI
CITY-ST-ZIP	CHICAGO, IL 60646

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12. 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: Edward Kaplan **EDWARD KAPLAN** 1/5/06 773-279-2
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ASSISTANT SECRETARY Daytime Phone #