


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000002233	
1. Entity Name SVC MANUFACTURING, INC.	

Principal Place of Business 321 NORTH CLARK STREET - 25-4 CHICAGO, IL 60610	Mailing Address 700 ANDERSON HILL RD PURCHASE, NY 10577
---	---



04012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 36-4286604	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$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

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS NURSE, BRIAN M 700 ANDERSON HILL RD PURCHASE, NY 10577
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT GARBUS, RENEE 700 ANDERSON HILL RD PURCHASE, NY 10577
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HEAVISIDE, W. TIMOTHY 700 ANDERSON HILL RD PURCHASE, NY 10577
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCGILL, SARAH 700 ANDERSON HILL RD PURCHASE, NY 10577
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V YAWMAN, DAVID 700 ANDERSON HILL RD PURCHASE, NY 10577
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LIGOURI, JOSEPH 700 ANDERSON HILL RD PURCHASE, NY 10577

UC0000137275
 04/29/04-80034-001 150.00

DO NOT WRITE IN THIS SPACE

12. I 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 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: *J. Ligouri* Date: 4/16/04 Daytime Phone #: (914) 253-2860
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR