## **2000 UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # J48038 1. Entity Name M&J WILKOW OF FLORIDA, INC.

## FILED Feb 29, 2000 8:00 am Secretary of State 02-29-2000 90194 009 \*\*\*150.00

N MICHIGAN AVE SUITE 200	Mailing Address  % CT CORPORATION SYSTEM INC. 180 N MICHIGAN AVE SUITE 200 CHICAGO IL 60601-7401 US			A STOUTH AND BY A BOOK AND ARREST WHEN SHALL RINGS	21211 11111 E1211 SI	511 81811 18 <b>6</b> 1
Principal Place of Business	3. Mailing Address					
Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN TH	IIS SPACE	
City & State	City & State		4.	FEI Number <b>36-3486486</b>		pplied For
Zip Country	Zip	Country	5.	Certificate of Status Desired	\$8.75 Ac	
6. Name and Address of Curre	 nt Registered Agent	<del>1 </del>	<u>_</u>	Name and Address of New Registers	Fee Require	90
		Name			<u> </u>	··
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		Street Add	Street Address (P.O. Box Number is Not Acceptable)			
PERMITATION PE 35524		City		F	Zip Cod	de
The above named entity submits this statement  Signature, typed or printed name of registered age  This corporation is eligible to satisfy its Intangit	ent and title if applicable. (NO)	s registered office or ru  E. Registered Agent signature  !!! FEE IS \$150.00	required when a	reinstating) DAT		
Tax filing requirement and elects to do so. (See criteria on back)	After MAY 1, 20	000 Fee will be \$55 ble to Department of	0.00 of State	10. Election Campaign Financing Trust Fund Contribution.	Adde	May Be d to Fees
P WILKOW, MARC R 180 N.MICHIGAN AVE.,#200 CHICAGO IL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AL	DDITIONS/CHANGES TO OFFICERS A	☐ Change	Addition
HARRIGAN, THOMAS 180 N MICHIGAN AVE #200 CHICAGO IL	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
HARVEY, DAVID W. 180 N.MICHIGAN AVE. ST-ZIP CHICAGO IL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
COBURN, CYNTHIA A 180 N MICHIGAN AVENUE #20 CHICAGO IL	☑ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	180 N.	ary Zientara Michigan Ave, #200 D, IL 60601	☐ Change	Addition
- courses ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	* 1		☐ Change	Addition
vounesc	☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	Addition

SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Marc R. Wilkow

2/14/00

(312) 726-9622

Daytime Phone #