

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2001 8:00 am**  
**Secretary of State**  
 05-22-2001 90004 009 \*\*\*150.00

**DOCUMENT #** P31598  
**Entity Name**  
 LASALLE BUSINESS CREDIT, INC.

<b>Principal Place of Business</b> 135 S. LASALLE ST., STE 860 CHICAGO, IL 60603	<b>Mailing Address</b> C/O MARTIN L. EISENBERG 135 S. LASALLE ST., STE 860 CHICAGO, IL 60603
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**659043**

DO NOT WRITE IN THIS SPACE

<b>Principal Place of Business</b>	<b>3. Mailing Address</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
<b>City &amp; State</b>	<b>City &amp; State</b>
<b>Zip</b>	<b>Country</b>

<b>4. FEI Number</b> 95-3869440	<b>Applied For</b> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

**6. Name and Address of Current Registered Agent**  
 CORPORATION SYSTEM  
 200 S. PINE ISLAND ROAD  
 PLANTATION, FL 33324

**7. Name and Address of New Registered Agent**

<b>Name</b>
<b>Street Address (P.O. Box Number is Not Acceptable)</b>
<b>City</b> <b>FL</b> <b>Zip Code</b>

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** \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) **DATE** \_\_\_\_\_

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
<b>OFFICER</b>	PD SHARKEY, MICHAEL 135 S. LASALLE STREET CHICAGO, IL 60603	<input type="checkbox"/>
<b>OFFICER</b>	SVPD JONES, GREGORY A. 135 S. LASALLE STREET CHICAGO, IL 60603	<input type="checkbox"/>
<b>OFFICER</b>	VP EISENBERG, MARTIN L. 135 S. LASALLE STREET CHICAGO, IL 60603	<input type="checkbox"/>
<b>OFFICER</b>	D BOBINS, NORMAN R. 135 S. LASALLE STREET CHICAGO, IL 60603	<input type="checkbox"/>
<b>OFFICER</b>	D HAMMOCK, M. HILL 135 S. LASALLE STREET CHICAGO, IL 60603	<input type="checkbox"/>
<b>OFFICER</b>	D MACUR, WALTER 135 S. LASALLE STREET CHICAGO, IL 60603	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>TITLE</b>	<b>NAME</b>	<b>STREET ADDRESS</b>	<b>CITY-ST-ZIP</b>

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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  **MARTIN L. EISENBERG VICE PRES.** (312) 904-2205

CR2034 (11/00)