

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005434

Entity Name: 18-CHAI CORP.**Current Principal Place of Business:**3201 OLD GLENVIEW ROAD
SUITE 302
WILMETTE, IL 60091**Current Mailing Address:**3201 OLD GLENVIEW ROAD
SUITE 302
WILMETTE, IL 60091 US**FEI Number:** 36-3428205**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

Title	CD
Name	ALTER, MICHAEL J
Address	3201 OLD GLENVIEW ROAD SUITE 302
City-State-Zip:	WILMETTE IL 60091

Title	P
Name	ALTER, MICHAEL J
Address	3201 OLD GLENVIEW ROAD SUITE 302
City-State-Zip:	WILMETTE IL 60091

Title	VP
Name	FREEDMAN, LAWRENCE M
Address	77 W. WASHINGTON STREET
City-State-Zip:	CHICAGO IL 60602

Title	VP
Name	THOMAS, RANDOLPH F
Address	3201 OLD GLENVIEW ROAD SUITE 302
City-State-Zip:	WILMETTE IL 60091

Title	VP
Name	GOULD, SAMUEL F
Address	1980 SPRINGER DRIVE
City-State-Zip:	LOMBARD IL 60148

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL J. ALTER**PRESIDENT****04/18/2019**_____
Electronic Signature of Signing Officer/Director Detail_____
Date