

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morthorn
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR 16 AM 10:47

DOCUMENT # 800993 (8)
1. Corporation Name
MIAMI CORPORATION

Principal Place of Business Mailing Address
C/O WALTER S CARR 410 N MICHIGAN AVE CHICAGO ILL 60611
C/O WALTER S CARR 410 N MICHIGAN AVE CHICAGO ILL 60611

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		25		11/15/1917		03/02/1994	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		36-1472840		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
23		28		<input type="checkbox"/>		\$5.00 May Be Added to Fees	
Zip		Country		29		30	
24		25		28		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			

BENNETT BARBARA K
95 MERRICK WAY, STE 535
CORAL GABLES FL 33134

B1 Name	
B2 Street Address (P.O. Box Number is Not Acceptable)	
B3	
B4 City	FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when restoring)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AT	1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MATES, DAVID C	1.2 NAME	Brooker, T. Kimball
STREET ADDRESS	410 N MICHIGAN AVE	1.3 STREET ADDRESS	410 N. Michigan Avenue
CITY- ST- ZIP	CHICAGO IL	1.4 CITY- ST- ZIP	Chicago, IL
TITLE	D	2.1 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BURNAP, CANDIDA D	2.2 NAME	Campbell, Marion D.
STREET ADDRESS	410 NO MICHIGAN AVE	2.3 STREET ADDRESS	410 N. Michigan Avenue
CITY- ST- ZIP	CHICAGO, IL 0	2.4 CITY- ST- ZIP	Chicago, IL
TITLE	D	3.1 TITLE	V/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	O'NEIL, ABBY	3.2 NAME	McCormick, Brooks
STREET ADDRESS	410 NO MICHIGAN AVE	3.3 STREET ADDRESS	410 N. Michigan Avenue
CITY- ST- ZIP	CHICAGO, IL 0	3.4 CITY- ST- ZIP	Chicago, IL
TITLE	V	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SVENSSON, LENNART	4.2 NAME	Danielson, Barbara S.
STREET ADDRESS	410 NO MICHIGAN AVE	4.3 STREET ADDRESS	410 N. Michigan Avenue
CITY- ST- ZIP	CHICAGO, IL 0	4.4 CITY- ST- ZIP	Chicago, IL
TITLE	V	5.1 TITLE	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MCCARTHY, EDWARD D	5.2 NAME	Schroeder, Charles E.
STREET ADDRESS	410 NO MICHIGAN AVE	5.3 STREET ADDRESS	410 N. Michigan Avenue
CITY- ST- ZIP	CHICAGO, IL 0	5.4 CITY- ST- ZIP	Chicago, IL
TITLE	T	6.1 TITLE	V/S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HOGAN, RICHARD F	6.2 NAME	Carr, Walter S
STREET ADDRESS	410 NO MICHIGAN AVE	6.3 STREET ADDRESS	410 N. Michigan Avenue
CITY- ST- ZIP	CHICAGO, IL 0	6.4 CITY- ST- ZIP	Chicago, IL

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 resolver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 (changed), or on an attachment with an address.

SIGNATURE:

David E. Mates
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

March 1, 1995 (312) 644-6720

David E. Mates, Assistant Treasurer

MIAMI CORPORATION

CORPORATION ANNUAL REPORT - 1995

13. Additions/changes to Officers and Directors in 12

	<u>Names</u>	<u>Title</u>	<u>Street Address</u>
1.	McCormick, Charlotte	D	410 N. Michigan Ave., Chicago, IL 60611
2.	Guth, James E.	V	" "
3.	Friedrichs, Michael R.	V	" "
4.	Seitz III, Charles E.	D	" "
5.	Strachan, Richard	D	" "
6.	Strachan, Stephen M.	D	" "
7.	Tennille, Jocelyn D.	D	" "