FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 01, 2002 8:00 am Secretary of State

05-01-2002 91562 032 ***150.00

DCC	LIMENITH OLFAL	71		ח	02 91362 032 *** 130.00
1. Entity	UMENT # 8/504	+0			
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(*************************************			SPACE		
ardreinite.					
2. Principal Place of Business 3. Mailing Address 3.715 SANDULLS ROAD 3. Mailing Address 3.075 SAND		WAL ROAD			
Suite, Apt. #, etc. Suite, Apt. #, etc.		aus lono			
HIA				DO NOT WRITE IN THIS SPACE	
City & State City & S		NoRTHBROO	// 7.	4. FEI Number	Applied For
	THBROOK, IL			4. FEI Nurnber 6/1567	Not Applicable
60	062 Country	60062	Country	5. Certificate of Status Desired	\$8.75 Additional
14 2 E		00002	<u> </u>		Fee Required
			Name -	7. Name and Address of Current	Registered Agent
	DO NOT W	RITE		RANCE COUNTS	SIONER
D		rendere grander i grander	ে বিভাগ Street Address (F	P.O. Box Number is Not Acceptable)
	IN THIS SE	ACE	THE	APITOL	
4			(1971 of 1 (1980 of 1)		
		and the same place and	City TALLA	HASSEE	FL 32301
o. The app	ove named entity submits this statement for	r the purpose of changing	its registered office or registere	ed agent, or both, in the State of Flo	rida.
•	_				
SIGNATUR	E Signature, typed or printed name of registered agent a	on eldenilous healthan	OTE: Registered Agent signature required v		
0 Th:				Milen reinstating)	DATE
Tax filing requirement and elects to do so.			May 1 Fee is \$150.00 * iy 1, Fee is \$550.00	10. Election Campaign Fina	encing \$5.00 May Be
(See cri	teria on back)	Amend	led UBR is \$61.25 able to Department of State	Trust Fund Contribution	
11.	OFFICERS AND (acie to Department of State	'	
TITLE	P		amie grafia a la lace		TANA A SERVICE AND A SERVICE A
NAME	EDWARD J. DIXON	4.	NAME .		
STREET ADDRES	- · · · · · · · · · · · · · · · · · · ·	FU	STREET ADDRESS :		
	NORTHBROOK, EL 60	062	CITY ST-ZIP	With the stage of	
TITLE NAME	ROBERT W. PIKE		MRE .	THE PROPERTY OF THE PROPERTY O	Carlo Alla Carlo San
STREET ADDRES	2775 SANDLES ROA	7)	NAME STREET ADDRESS		
CITY-ST-ZIP	NORTHBROOK, TILLIND		CITY ST ZIP		
TITLE	VID		Juli		
NAME	RICHARD F. COHEN 2775 SANDERS ROA		NAMÉ	and and the second section of the second	
STREET ADDRESS CITY - ST - ZIP	2775 SANDERS ROA	HD _	STREET ADDRESS	TOO NOT	MOITE
	NORTHBROOK, IL 60	062	CHY-ST-ZIP	DO NOT V	VILLE
title Name	FIRED AL LIABLE	-	TIME.	IN THIS S	DACE
STREET ADDRESS	ENARD M. LIDDY 2775 SANDERS R	oAD	NAME.		
CHTY - ST - ZIP	NORTHBROOK, TI. (M	067	CITY-ST-ZIP		
TITLE	VICE President / CONTR	POLLER	THE		AMORA ALCOHET ST.
NAME	SAMUEL H. PILCH		NAAAF 25 79		
			SPECIAL STATES OF CONTRACTOR		
DITY-ST-ZIP	3075 SANDERS ROAD		STREET ADDRESS		
	NORTHBROOK, FL 600	62_	THE REPORT OF THE PROPERTY OF THE PARTY OF T		
	NORTHBROOK, FL 6000 VICE Presklent / Trens	62_	STREET ADDRESS		
lame.	NORTHBROOK, FL 600 VICE President Trensi JAMES P. ZILS	62_ ucer	STREET ADDRESS CCITY ST-ZIP TITLE NAME:		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	NORTHBROOK, FL 6000 VICE President Trensi JAMES P. ZILS	ucer	SIREE ADDRESS (CITY ST ZIP		

13. Thereby 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 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lynn Cirrincione
Authorized Representative

4/60/02 (847) 402-3029