## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Apr 23, 2008 08:00 AN **DOCUMENT #837907** JAN 0 2 2008 NATIONAL CASEIN OF NEW JERSEY, INCORPORATED MAZZEFFI & CO. Principal Place of Business Mailing Address 601 WEST 80TH STREET **401 MARTHAS LANE** RIVERTON, NJ 08077-0226 CHICAGO, IL 60620-0226 01022008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 21-0639805 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CLARK, FAITH DO NOT WRITE 15018 S. W. 15TH AVENUE NEWBERRY, FL 32669 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE EVANS, NORMAN NAME U00000915722 STREET ADDRESS 601 WEST 80TH ST. 05/09/08-80027-003 150.00 CITY-ST-ZIP CHICAGO IL, TITLE NAME COOK, CHARLES L. STREET ADDRESS 601 W 80TH ST CITY+ST-ZIP CHICAGO, IL TITLE NAME COOK, HOPE T STREET ADDRESS 601 W. 80TH STREET DO NOT WRITE CITY-ST-7IP CHICAGO, IL 60620 TITLE IN THIS SPACE NAME FERRARIO, DANIEL STREET ADDRESS 601 W 80TH ST CITY-ST-ZIP CHICAGO, IL TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

77*3-846-73*0,

**FILED**