FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1998**

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

FILED
Jan 15 1998 8:00am
Secretary of State

DOCUMENT # **848007** (1)

1. Corporation Name
RYCOLINE PRODUCTS, INC.

Principal Place of Business
5540 NORTHWEST HIGHWAY
CHICAGO IL 60630-1116

Mailing Address
5540 NORTHWEST HIGHWAY
CHICAGO IL 60630-1116

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/21/1981

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number
36-3102238
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☒ Yes ☐ No

9. **Name and Address of Current Registered Agent**
PALMER, CHARLES L.
312 SW 17TH ST STE 300
FORT LAUDERDALE FL 33302

10. **Name and Address of New Registered Agent**
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 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 resigning) DATE

12. OFFICERS AND DIRECTORS

TITLE	TD	☐ DELETE
NAME	PALMER, CHARLES	
STREET ADDRESS	312 SW 17TH ST STE 300	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	S	☐ DELETE
NAME	ROCHE, JAMES M.	
STREET ADDRESS	111 W MONROE STREET	
CITY-ST-ZIP	CHICAGO IL	
TITLE	AS	☐ DELETE
NAME	DIDOMENICO, VICTORIA	
STREET ADDRESS	8426 W CATALPA	
CITY-ST-ZIP	CHICAGO IL	
TITLE	V	☐ DELETE
NAME	ANDERSON, GARY A.	
STREET ADDRESS	30 W 110TH GLENHURST CT	
CITY-ST-ZIP	WARRENVILLE IL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☒ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS	3608 N. FALCON COURT	
3.4 CITY-ST-ZIP	ROLLING MEADOWS CHICAGO. IL.	
4.1 TITLE		☒ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS	1124 WIND ENERGY PASS	
4.4 CITY-ST-ZIP	BATAVIA IL.	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 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 receiver 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 if changed, or on an attachment with an address.

SIGNATURE: GARY ANDERSON 01/05/98 773-775-6755

CR2E034 (10/97)