

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

FILED  
Mar 03 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # 853129 (5)  
1. Corporation Name  
CHICAGO METALLIC PRODUCTS, INC.



Principal Place of Business  
800 ELA ROAD  
LAKE ZURICH IL 60047  
US

Mailing Address  
C/O SIDNEY S HESS JR  
30 N LASALLE ST SUITE 2800  
CHICAGO IL 60602-2598  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		06/11/1982	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		36-2834591	
24 Country		29 Country		5. Certificate of Status Desired	
				Applied For	
				Not Applicable	
				6. Election Campaign Financing	
				Trust Fund Contribution	
				7. 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				10. Name and Address of New Registered Agent			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				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 reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	DC	<input type="checkbox"/> DELETE		1.1 TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	FEAR, GEOFFREY C.			1.2 NAME	PAUL B. FEAR		
STREET ADDRESS	800 ELA ROAD			1.3 STREET ADDRESS	800 ELA ROAD		
CITY-ST-ZIP	LAKE ZURICH IL 60047			1.4 CITY-ST-ZIP	LAKE ZURICH, IL 60047		
TITLE	SD	<input type="checkbox"/> DELETE		2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HESS, SIDNEY J., JR.			2.2 NAME			
STREET ADDRESS	30 NORTH LASALLE ST			2.3 STREET ADDRESS			
CITY-ST-ZIP	CHICAGO IL			2.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BARTON, RALPH W			3.2 NAME			
STREET ADDRESS	800 ELA ROAD			3.3 STREET ADDRESS			
CITY-ST-ZIP	LAKE ZURICH IL			3.4 CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> DELETE		4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHWARTZ, RICHARD M.			4.2 NAME			
STREET ADDRESS	800 ELA ROAD			4.3 STREET ADDRESS			
CITY-ST-ZIP	LAKE ZURICH IL			4.4 CITY-ST-ZIP			
TITLE	SVPD	<input type="checkbox"/> DELETE		5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCPHEETERS, KENNETH K.			5.2 NAME			
STREET ADDRESS	800 ELA ROAD			5.3 STREET ADDRESS			
CITY-ST-ZIP	LAKE ZURICH IL			5.4 CITY-ST-ZIP			
TITLE	VPT	<input type="checkbox"/> DELETE		6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	FABER, MARK R			6.2 NAME			
STREET ADDRESS	800 ELA ROAD			6.3 STREET ADDRESS			
CITY-ST-ZIP	LAKE ZURICH IL			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:

2/24/98 (842) 438-2171

CR2E034 (10/97)