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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

DOCUMENT # 855332 (3)

1. Corporation Name

STEINER COMPANY, INC.

Principal Place of Business 1 EAST SUPERIOR ST Malling Address

P O BOX 2317

CHICAGO IL 60611-2507

SALT LAKE CITY UT 84110

DO NOT WRITE IN THIS SPACE

FILED

May 15 1998 8:00am

Secretary of State

							₹.	Date Incorporated or Qualified 01/25/1983		
2. Principal Place of Business		2a. Malling Address				4		4. FEI Number		Applied For
		26						87-038 4 532		Not Applicable
suite, Apt.#, etc.		27	Suite, Apt. #, etc.				Б.	Certificate of Status Desired	\$	8.75 Additional Fee Required
Aty & State		28	City & State				6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Sip	Country 25	29	Zip	Co.	untry		8.	This corporation owes or has paid the cu Personal Property Tax due June 30.	rrent y	ear Intangible
9. Name	and Address of Current	Regi	stered Agent				10.	Name and Address of New Registered	Agent	
T CORPORA	TION SYSTEM				B1	Name				
1200 SOUTH PINE ISLAND ROAD			82	Street Address (P.O. Box Number is Not Acceptable)						
PLANTATION FL 33324		63								
					84	City		FL	85	Zip Code
	suite, Apt. #, etc. Aty & State Sip 9. Name T CORPORA 00 SOUTH	Suite, Apt. #, etc. Ty & State Cip Country 25 S. Name and Address of Current T CORPORATION SYSTEM 00 SOUTH PINE ISLAND ROW ANTATION FL 33324	iulte, Apt. #, etc. 27 Hy & State 28 Cip Country 25 28 28 29 3. Name and Address of Current Registry T CORPORATION SYSTEM 00 SOUTH PINE ISLAND ROAD ANTATION FL 33324	Suite, Apt. #, etc. 27 Hy & State City & State 28 Cip Country Zip 25 28 S. Name and Address of Current Registered Agent T CORPORATION SYSTEM 00 SOUTH PINE ISLAND ROAD ANTATION FL 33324	26 Suite, Apt. #, etc. 27 Sty & State Cip Country Zip Country 28 S. Name and Address of Current Registered Agent T CORPORATION SYSTEM 00 SOUTH PINE ISLAND ROAD ANTATION FL 33324	26	26	2a. Malling Address 2b. 2c. 2c.	Trincipal Place of Business 2a. Malling Address 2b. Suite, Apt. \$, etc. 27 Suite, Apt. \$, etc. 27 Suite, Apt. \$, etc. 27 Siy & State City & State Country 25 29 Country 26 29 Country 20 30 Country 20 30 S. Name and Address of Current Registered Agent T CORPORATION SYSTEM OO SOUTH PINE ISLAND ROAD ANTATION FL 33324 City & City City & City City & Country 26 Country 27 Country 28 Country 29 Country 30 Country 40 Country 41 Country 42 Country 42 Country 43 Country 45 Country 47 Country 48 Country 49 Country 40 Country 41 Country 41 Country 42 Country 42 Country 43 Country 45 Country 47 Country 48 Country 49 Country 40 Country 4	Trincipal Place of Business 2a. Mailing Address 2b. Juite, Apt. \$, etc. 25 Suite, Apt. \$, etc. 27 Suite, Apt. \$, etc. 27 City & State City & State City & State Country 28 Country 29 Country 28 R. Name and Address of Current Registered Agent T CORPORATION SYSTEM 00 SOUTH PINE ISLAND ROAD ANTATION FL 33324 City & City

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

SIGNATURESig	nature, typed or printed name of registered as	gent and title if app	olicable (NOTE: Register	ed Agent signature required when reinstating)	DATE	
2.	OFFICERS AND DIRECT	ORS	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRE	CTORS IN 12
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P/D GUY MARCHESI 1 EAST SUPERIOR ST CHICAGO IL 60611	DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		Change	Addition
TITLE Name Street adoress City - St - Zip	V/D GREG FACHET 1 EAST SUPERIOR ST CHICAGO IL 60611	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP		Change	Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S/D MARK TRUXAL 1 EAST SUPERIOR ST CHICAGO IL 60611	DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP		Change	Addition
TITLE NAME STREET ADDRESS CITY • ST - ZIP	AS/D WALTER PIECEWICZ 200 E RANDOLPH STE 7 CHICAGO IL 60601	DELETE 300	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		Ohange	Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS/D ROBERT D PAGE 505 E SOUTH TEMPLE SALT LAKE CITY UT 84	DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		Change	Addition S 5
TITLE NAME STREET ADDRESS CITY • ST - ZIP		DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	0000025 -05/18/980 ***150.00		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 eath; 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 of Block 13 if changed, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/27/98 Date

801/328-8831 Daytime Phone #