## 2000 UNIFORM BUSINESS REPORT (UBR)

## May 12, 2000 8:00 am Secretary of State DOCUMENT # 855332 STEINER COMPANY, INC. OF UTAH 05-12-2000 90043 040 \*\*\*150.00 Mailing Address Principal Place of Business 1 EAST SUPERIOR ST P. O. BOX 2317 SALT LAKE CITY UT 84110-2317 CHICAGO IL 60611-2507 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 87-0384532 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. ☐ Addition Change ☐ Delete TITLE TITLE MARCHESI, GUY NAME NAME STREET ADDRESS STREET ADDRESS 1 EAST SUPERIOR ST CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60611-2507 Addition ☐ ∩elete TITLE ☐ Change TITLE NAME NAME FACHET, GREG STREET ADDRESS STREET ADDRESS 1 EAST SUPERIOR ST CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60611-2507 Change Addition Delete TITLE TITLE NAME MUSSON, RICHARD MUFFON, RICHARD NAME STREET ADDRESS STREET ADDRESS 1 EAST SUPERIOR ST CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60611 ☐ Addition ☐ Change Delete TITLE TITLE ASD NAME NAME PIECEWICZ, WALTER STREET ADDRESS STREET ADDRESS 200 E RANDOLPH STE 7300 CITY-ST-7IP CITY-ST-ZIP CHICAGO IL 60601 ☐ Change Addition TITLE ASD ☐ Delete TITLE PAGE, ROBERT D NAME NAME STREET ADDRESS STREET ADDRESS **505 E SOUTH TEMPLE** CITY-ST-ZIP CITY-ST-ZIP SALT LAKE CITY UT 84102 ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS

FILED

Daytime Phone #

13. 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 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE AND TYPED OR PRINTED NAME OF SENING OFFICER OR DIRECTOR 801/328-8831 SIGNATURE:

CITY-ST-ZIP