

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 03, 2004 8:00 am**  
**Secretary of State**

03-03-2004 90005 016 \*\*\*150.00

**DOCUMENT # F02000000930**

1. Entity Name

GOSS INTERNATIONAL CORPORATION



Principal Place of Business

3 TERRITORIAL CT.  
BOLINGBROOK, IL 60440-3557

Mailing Address

3 TERRITORIAL CT.  
BOLINGBROOK, IL 60440-3557

**54014385**



02222004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number

75-2984922

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE  
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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE D  
NAME PECHOCK, CHRIS  
STREET ADDRESS 3 TERRITORIAL CT.  
CITY-ST-ZIP BOLINGBROOK, IL 604403557

TITLE P  
NAME SUTIS, RICHARD J  
STREET ADDRESS 3 TERRITORIAL CT.  
CITY-ST-ZIP BOLINGBROOK, IL 604403557

TITLE CFOT  
NAME GAYNOR, JOSEPH P III  
STREET ADDRESS 3 TERRITORIAL CT  
CITY-ST-ZIP BOLINGBROOK, IL 604403557

TITLE S  
NAME SPIEGEL, MARYANN  
STREET ADDRESS 3 TERRITORIAL CT.  
CITY-ST-ZIP BOLINGBROOK, IL 604403557

TITLE ASAT  
NAME DILLMAN, DANIEL E  
STREET ADDRESS 3 TERRITORIAL CT.  
CITY-ST-ZIP BOLINGBROOK, IL 604403557

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*R. KLIMEK*

*2/26/04*

*(630) 755-9350*