## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2007 08:00 A Secretary of State

Daytime Phone #

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DOCUMENT # F0400003787  1. Entity Name HELEN R. FRIEDLI, P.C.				Secretary of St				
Principal Plac	ce of Business	\$4-91 A-1-1		-				
		Mailing Address						
	IONROE STREET 60606-5096	227 WEST MONROE STREET		ļ.				
CINCAU, IL (	00000-5096	CHICAO, IL 60606-5096						
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E	O NOT WRITE	CE	4. FEI Numb	<u> </u>		Applied For		
				36-374			Not Applicable	
				5. Certificate	of Status Desired		8.75 Additional	
<del></del>	6. Name and Address of Current Re	gistered Agent		<u> </u>			ee Required	
COELMAN	N, IRA J SCAYNE BLVD., 22ND FLOOR		DO	NOT W	VRITE			
MIAMI, FL 33131-4336								
				IN	THIS S	PACE		
			-					
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 here of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating)  DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financia Trust Fund Contribution.				.00 May Be ed to Fees				
10.	OFFICERS AND DI	RECTORS	<u> </u>				<del></del>	
TITLE	CPST		1					
NAME	FRIEDLI, HELEN R					,		
STREET ADDRESS	227 WEST MONROE STREET							
CITY-ST-ZIP	CHICAO, IL 606065096		ł '					
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NAME				•				
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NAME !			ł					
STREET ADDRESS								
CITY-ST-ZIP			L					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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:

\*\*True\*\*

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR