2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F05000007343

1. Entity Name CVP I.D., INC.



FILED Jan 25, 2008 08:00 A Secretary of State

Principal Place of Business

2518 WISCONSIN AVE. DOWNERS GROVE, IL 60515 Mailing Address

2518 WISCONSIN AVE. DOWNERS GROVE, IL 60515



DO NOT WRITE IN THIS SPACE

01142008 No Chg-P CR2E034 (11/05)

4. FEt Number Applied For Not Applied For Not Applied For Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 DO NOT WRITE

| | | | | 31. 8 | n ship the first them to the first the | |
|--|---|--|--|------------------------------|--|---------------------|
| | named entity submits this statement for the pions of registered agent. | urpose of changing its registere | ed office or regi | stered agent, or bo | th, in the State of Florida. I am famili | ar with, and accept |
| SIGNATURE | Signature, typed or printed name of registered agent and title in | Landonkla (MATE Pagetter) | d A a a b a page to to to a | uired when reinstating) | DATE | |
| | Signature, typed or printed traine or registered agent and that | applicable. (NOTE: negislered | o Agent signature req | olled witers reinstalling) | DATE | |
| FIL After M | E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00 | Election Campaign Finan Trust Fund Contribution. | ` | 5.00 May Be Added to Fees | 000000798147 01/30/08-80017-009 | 5 150.00 |
| 10. | OFFICERS AND DIREC | TORS | | * r | THE PROPERTY OF THE PROPERTY O | n i station i |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PTD BORK, WESLEY P JR. 4300 NORTH OCEAN BLVD., #10K FT. LAUDERDALE, FL 33308 | | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VSD MYKLEBY, LAURIE G 3971 GULF SHORE BLVD., PH. 105 NAPLES, FL 34103 | | | | | |
| TITLE NAME. STREET ADDRESS CITY-ST-ZIP | | | The state of the s | DO | NOT WRITE | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | | | |
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12. Hereby certify that the information supplied with this filing 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:

STREET ADDRESS CITY-ST-ZIP

ID TYPED OR PRINTED AND OF SIGNING OFFICER OR DIRECTOR

Wesley P. Bork, Jr. 1-17-08 630-852-1190

Daytime Phone #