2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 20, 2000 8:00 am DOCUMENT # F93000005812 1. Entity Name Secretary of State TR SAN MARCO CORP. 03-20-2000 90140 015 ***150.00 Mailing Address Principal Place of Business 1201 NORTH CLARK STREET 1201 NORTH CLARK STREET CHICAGO IL 60610 A0032136 CHICAGO IL 60610 U\$ US 3. Majling Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 13-3746427 Not Applicable Country \$8.75 Additional Country Zip Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301 Zip Code City ۴L 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 0.14. (3/19) ☐ Change ☐ Addition ☐ Delete TITLE MCKAY, TERRY NAME NAMÉ STREET ADDRESS 1201 NORTH CLARK STREET, SUITE 300 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL Addition ☐ Change TITLE ☐ Delete TITLE ROSENBERG, THOMAS B NAME NAME 1201 NORTH CLARK STREET, SUITE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL Change ☐ Addition Delete TITLE NAME PABIAN, THOMAS NAME 1201 NORTH CLARK STREET, SUITE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL Change Addition ☐ Delete TITLE VARLAS, DENO T. NAME 1201 NORTH CLARK STREET, SUITE 300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 leport of 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 11 or Block 12 if changed, or on an attachment with an addless; with all other-like empowered.