2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 18, 2005 8:00 am Secretary of State DOCUMENT # F9400000546 1. Entity Name 02-18-2005 90066 050 ***150.00 E.O.P.E., INC. Principal Place of Business Mailing Address 400 OAKWOOD ROAD LAKE ZURICH IL 60047 400 OAKWOOD ROAD LAKE ZURICH IL 60047 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) City & State City & State Applied For 36-2754021 Not Applicable 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 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 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) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Vice President ☐ Change Addition TITLE TITLE □ Delete ANDERSON, KENNETH R NAME MAME Joseph Fahey 700 BENT RIDGE LANE STREET ADORESS STREET ADDRESS 400 bakwood Bd Lake Zurich, 16 60047 Vice President Kokichi Tadano **ELGIN IL 60120** CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition ☐ Delete TITLE TITLE RUND, JOSEPH V NAME NAME STREET ADDRESS STREET ADDRESS 6214 PINE CONE COURT 400 Oakwood Rd Lake Zurich, 1160047 CITY-ST-ZIP LONG GROVE IL 60047 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME* NAME OBRINGER, DANIEL J. STREET ADDRESS STREET ADDRESS 2333 IROQUOIS DR. CITY-ST-ZIP GLENVIEW IL CITY-ST-ZIP TITLE ☐ Change Addition ☐ Delete TANAKA, TAKASHI MAME NAME 400 OAKWOOD RD. STREET ADDRESS STREET ADDRESS LAKE ZURICH IL 60047 CITY-ST-ZIP CITY-ST-Z/P ☐ Delete TITLE ☐ Change Maddition | THEF BLY, STEVEN M NAME NAME 400 OAKWOOD RD STREET ADDRESS STREET ADDRESS LAKE ZURICH IL CITY-ST-ZIP CITY-ST-ZIP ☐ Defete ☐ Change ☐ Addition TITLE TITLE YOHSIAKI, NAGAO NAME NAME 400 OAKWOOD ROAD STREET ADDRESS STREET ADDRESS LAKE ZURICH IL 60047 CITY-ST-ZIP CITY-ST-7IP 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.

Manual O kines DANIEL J. Obeinger 2
SIGNATURE AND SPEED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR 1/P. Administration Date

FILED

Daytime Phone #