


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 08, 2007 8:00 am
Secretary of State

02-08-2007 90048 038 ***150.00

DOCUMENT # F94000000546

1. Entity Name
E.O.P.E., INC.



Principal Place of Business
**400 OAKWOOD ROAD
 LAKE ZURICH, IL 60047**

Mailing Address
**400 OAKWOOD ROAD
 LAKE ZURICH, IL 60047**

2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State
 Zip Country

40011937



01242007 Chg-P CR2E034 (12/06)

4. FEI Number
36-2754021

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** 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) DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	VP	<input type="checkbox"/> Delete		TITLE	VP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	DITSH, TERRY			NAME	KUBO, HIROSHI		
STREET ADDRESS	400 OAKWOOD RD			STREET ADDRESS	400 OAKWOOD, RD		
CITY-ST-ZIP	LAKE ZURICH, IL 60047			CITY-ST-ZIP	LAKE ZURICH, IL 60047		
TITLE	VP	<input type="checkbox"/> Delete		TITLE	VP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	BEST, MIKE			NAME	TADANO, KOKICHI		
STREET ADDRESS	400 OAKWOOD RD			STREET ADDRESS	400 OAKWOOD, RD		
CITY-ST-ZIP	LAKE ZURICH, IL 60047			CITY-ST-ZIP	LAKE ZURICH, IL 60047		
TITLE	V	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	OBRINGER, DANIEL J.			NAME			
STREET ADDRESS	2333 IROQUOIS DR.			STREET ADDRESS			
CITY-ST-ZIP	GLENVIEW, IL			CITY-ST-ZIP			
TITLE	VP	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	FAHEY, JOSEPH			NAME			
STREET ADDRESS	400 OAKWOOD RD			STREET ADDRESS			
CITY-ST-ZIP	LAKE ZURICH, IL 60047			CITY-ST-ZIP			
TITLE	V	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	BLY, STEVEN M			NAME			
STREET ADDRESS	400 OAKWOOD RD			STREET ADDRESS			
CITY-ST-ZIP	LAKE ZURICH, IL			CITY-ST-ZIP			
TITLE	P	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	YOSHIKI, NAGAO			NAME			
STREET ADDRESS	400 OAKWOOD ROAD			STREET ADDRESS			
CITY-ST-ZIP	LAKE ZURICH, IL 60047			CITY-ST-ZIP			

12. I 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: *Daniel J. Obinger* 1/24/2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #