


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # F94000004389**  
 1. Entity Name  
**PRO SERIES, INC. OF ILLINOIS**



Principal Place of Business      Mailing Address  
**1012 EAST BROWARD BLVD**      **1012 EAST BROWARD BLVD.**  
**FORT LAUDERDALE, FL 33301 US**      **FORT LAUDERDALE, FL 33301 US**

**DO NOT WRITE IN THIS SPACE**



03122006 No Chg-P CR2E034 (11/05)

4. FEI Number **36-3466821** Applied For Not Applicable  
 5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**KOTLER, MICHAEL I**  
**54 SW BOCA RATON BLVD.**  
**BOCA RATON, FL 33432**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when retreating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00 —**  
**After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CT MARKOFF, MICKEY 1012 EAST BROWARD BLVD FORT LAUDERDALE, FL 33301
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HAMMAN, GEORGE 25 E. WASHINGTON STREET SUITE 600 CHICAGO, IL 60602
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WILLIAMS, JOHNNY 1012 EAST BROWARD BLVD FORT LAUDERDALE, FL 33301
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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 04/29/06-80051-013 150.00

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 and all other like empowered.

SIGNATURE: Mickey Markoff 3/13/06 954-467-3555  
SIGNATURE AND TYPED OR PRINTED NAME OF SHOWING OFFICER OR DIRECTOR Date Daytime Phone #