## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9500000605 (4)

CAFE CHEVAL, INC.

Principal Place of Business

Mailing Address

JENNER & BLOCK, C/O NICOLE FINITZO

JENNER & BLOCK, C/O NICOLE FINITZO

**FILED** Jan 28 1998 8:00am Secretary of State



ONE WESTMINSTER PLACE				ONE WESTMINSTER PLACE					ļ		-	NO NOT	WOITE	IN TUIC	CDACE		
LAKE FOREST IL 60045				LAKE FOREST IL 60045					}	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified							
										02/06		a Di Gia	annoo				
2. Principal Place of Business					2a. Mailing Address					4. FEI Number						TAD	plied For
21				26					ľ	36-3992615						<del></del> -	Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.						E Codilina	to of Ctot	un Danie			\$8.		dditional
22				27						5. Certifica	te oi Stat	us Desir	ea		F	e Re	quired
City & State				City & State						6. Election Campaign Financing \$5.00 May Be							May Be
23				28						Trust Fund Contribution Added to Fees							
Zip	į.	Coun	try	$\vdash$	Zip Country			1	8. This corporation owes or has paid the current year in							_	
24		25 Add	29	stered Agent					Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent								
					neu Agent		B1	Name		10, Name a	nu Aoure	38 01 14	an uaf	Jistered	Agoni		
CORPORATION SERVICE COMPANY								ranic									
1201 HAYS STREET Tallahassee Fl 32301					82 Stre			Street .	t Address (P.O. Box Number is Not Acceptable)								
į (Al	LLAITAGGEE	TL JEJ	VI				83	<u> </u>									
							84	City				•		FL	85	Zip C	ode
11. Pursuant	to the provision	ns of So	ctions 607 0502	and 60	7.1508, Florida Statut	les the	l abov	e-named	Learners	ation submit	this state	ement fo	or the no		f chanc	ina its	registered
office or re	egistered age	ent, or bo	th, in the State o	of Florida	a. Such change was Section 607.0505, FI	authorize	ed b	v the core	poration	's board of	lirectors.	l hereby	accep	t the app	pointme	nt as i	registered
•	iri r <b>a</b> irinkar <b>w</b> atr	n, and ac	cept trie obliga	llous or	Section 607.0505, FF	unua sia	atute	S.									ľ
SIGNATURE	Signature, typed o	r printed fin	ne of registered agen	l and litle if	applicable (NOT	IE Register	ed Ap	ent signature	e required w	when reinstating)				DATE			
12.			OFFICERS AND	DIRECT	ORS	13				ADDITIO	NS/CHAN	GES TO	OFFIC	ERS AN	D DIREC	CTOR	S IN 12
TITLE	PTC				☐ DELETE	1.1	TITLE								Cha	ange	Addition
NAME	MIDDLET			1,2	NAME	İ	1										
STREET ADDRESS C/O N. FINITZIO, ONE WESTN LAKE FOREST IL 60045					R PLACE	1.3	STREET	ADDRESS									ļ
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TITLE	8				☐ DELEXE	21	THLE		İ						☐ Cha	inge	☐ Addition
NAME	HALL, BA						2.2 NAME										ţ
STREET ADDRESS 14283 SNOWBERRY DRIVE WELLINGTON FL 33414-8602								ADDRESS									
CITY-ST-ZIP	WELLING	TUN FL	33414-0002		- Disease			ST-ZIP			<del></del>				TT 01.		1.4000
TITLE					☐ DELETE	3.1									☐ Chá	inge	☐ Addition
NAME							NAME										
STREET ADDRESS								ADDRESS									į
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NAME					₩ britin		NAME								L-4 VIII	ange.	Addition
STREET ADDRESS								ADDRESS									ŀ
CITY-ST-ZIP							STREET STY - S										
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NAME					<u> </u>		NAME	ļ								δ.	
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STREET ADDRESS						6.3 9	TREET	ADDRESS									
CITY-ST-ZIP							XITY-S	1	1								

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

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