2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **F9500004980** 1. Entity Name

PERFORMANCE DEVELOPMENT OF ILLINOIS, INC.

PERFORMANCE DEVELOPMENT OF ILLINOIS, INC.						05-10-2001 90038 030 ***150.00				
Principal Plac	e of Business	Mailing Address								
	LSBORO BLVD.	1761 WEST HILLSBORO BLVD. DEERFIELD BEACH FL 33442						ום	JU477	(1
2. Principal P	Place of Business	3. Mailing Address 400 S DIXIE H	3. Mailing Address 400 S DIXIE HWY							
Suite, Apt.	#, etc.	Suite, Apt. #, etc. SUITE 310	Suite, Apt. #, etc. SUITE 310			DO NOT WRITE IN THIS SPACE				
City & Stat	е	City & State BOCA - RATON, F	City & State BOCA - RATON, FL 33432			FEI Number	36-3070618	3		oplied For ot Applicable
Zip	Zip Country Zip		Country			5. Certificate of Status Desired S8.75 Additional Fee Required				
 -	6. Name and Address of Curren	t Registered Agent			7.	Name and Add	ress of New R	egistered /	Agent	
				Name	TAMES 4	и поос				
GOLDENBERG, RICHARD 1761 WEST HILLSBORO BLVD. DEERFIELD BEACH FL 33442				JAMES A. HOOS Street Address (P.O. Box Number is Not Acceptable) 400 S DIXIE HWY - SUITE 310						
					•				_	
				City	BOCA RA	ATON		FL	Zip Coo 3343	le 2
8. The above SIGNATURE	e named entity submits this statement (the State of Fig			
0.0	Signature, typed or printed name of registered ager	nt and title if applicable. (NO	TE: Registere	ed Agent signatu	re required whe	n reinstating)	. <u>.</u> .	DATE		
Tax filing requirement and elects to do so. Afte			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Ike Check Payable to Department of Star				n Campaign Fin und Contributio	_		00 May Be d to Fees
11.	OFFICERS ANI	D DIRECTORS	12.	*****		ADDITIONS/CH/	ANGES TO OFF	ICERS AND	DIRECTOR	IS IN 11
TITLE NAME STREET ADDRESS	CDPS GOLDENBERG, RICHARD 1761 WEST HILLSBORO BLVD.	🔼 Delete	TITL NAM STRI			DENT GOLDENBER FERDONIA			X Change	☐ Addition
CITY-ST-ZIP			CITY	r-st-zip	LOS AN	OS ANGELES, CA 90068				
TITLE NAME STREET ADDRESS		☐ Delete			PAUL (1718 F	PRESIDENT GOLDENBER ESPLANADE	G #511	_	☐ Change	反 Addition
TITLE -		Delete	TITL	E ··	SECRE	O BEACH, TARY/TREA		./	☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP			ŞTR	EET ADDRESS 7-ST-ZIP	400 S	A. HOOS DIXIE HW		E 310		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			-BUUA I	RATON, FL	33432		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITL NAA STR	.E					☐ Change	Addition
TITLE		□ Delete	TITI	F			~		Change	Addition

13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

JAMES A. HOOS, SEC/TREAS

☐ Delete

04/26/2001 (561)395-1822

FILED

May 10, 2001 8:00 am Secretary of State