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

**PROFIT** CORPORATION ANNUAL REPORT

## Jan 15 1998 8:00am FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State Secretary of State

**FILED** 

	1998		CORPORATIONS		
	MENT # F96000 Eisen Holdings, Inc.	0000070 (0)	)	1 100 (110 to 100 to 10	Dāja asab dāja asab Jāja tāpa
		(9)			
Principal Place	e of Business	Mailing Address	9	I 1881169 1418 18110 BUILT SOLAL OBJIK BOILK	<b>40</b> 611 <b>06</b> 111 <b>00</b> 111 1 <b>00</b> 11 <b>66</b> 11 <b>104</b> 1
1250 DEERE DEERFIELD IL		% DAVID EÎGEN. APAR 1250 DEER <b>O</b> ARK LANI DEERFIELD IL 60015		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualified 12/29/1995	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
1	See Above		See Above	65-0634814	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
4	9. Name and Address of Current	29 Registered Agent	30	Personal Property Tax due June 30.  10. Name and Address of New Registere	Yes No
LA/II	LIAMS, ALICE M	Hogistorea Agont	81 Name	10, Hains and Address of flow Hogiston	io Agent
ECKERT SEAMANS CHERIN & MELLOTT  200 WEST COLLEGE AVENUE, 3RD FLOOR			62 Street Add	ress (P.O. Box Number is Not Acceptable)	
			oz Sileel Add	ress (F.O. Box Number is Not Acceptable)	
TAL	LAHASSEE FL 32301		83		
			84 City	F	85 Zip Code
41 Purcuant 6	to the provisions of Sections 607.0503	and 607 1508. Elorida Stati	ulas the shave named corr	poration submits this statement for the purpose	
office or reagent. Lar	egistered agent, or both, in the State in familiar with, and accept the obligation	of Florida. Such change was tions of, Section 607.0505, F	s authorized by the corpora Florida Statules.	tion's board of directors. I hereby accept the a	ppointment as registered
	Signature, typed or printed name of registered agor		TE: Registered Agent signature requi		
12.	OFFICERS AND	DIRECTORS	13. 11 TITLE	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12  Change Addition
NAME	EISEN, DAVID		1.2 NAME		
STREET ADDRESS	1250 DEERE PARK LANE		1.3 STREET ADDRESS		
CITY-ST-ZIP	DEERFIELD IL		1.4 CITY-ST-ZIP		
	•	DELETE	21 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY+ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		
CITY-\$T-ZIP TITLE		DELETE	5.1 TITLE		Change Addition
NAME (			5.2 NAME		
STREET ADDRESS	•		5.3 STREET ADDRESS		
CITY - ST - ZIP		<b></b>	5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME CTREET ADDRESS			6.2 NAME		
STREET ADDRESS CITY-ST-ZIP			6.3 STREET ADDRESS 6.4 City - St - Zip		
14. Thereby o	ertify that the information supplied wit	h this filing does not qualify	for the exemption stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that the information
officer or o	director of the corporation or the recei or Block 13 if changed, or n an attac	ver or trustee empowered to	curate and that my signatu execute this report as req	re shall have the same legal effect as if made uired by Chapter 607, Florida Statutes; and tha	under oath; that I am an at my name appears in 312 ~