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FILED
May 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # F96000001380 (2)

1. Corporation Name
KEVIN BERG & ASSOCIATES, INC.



Principal Place of Business
2109 PALM AVENUE
302
TAMPA FL 33605
US

Mailing Address
2109 PALM AVENUE
302
TAMPA FL 33605
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip

Country

2a. Mailing Address

26 **640 N. LaSalle #3**

27 Suite, Apt. #, etc.

27 **350**

28 **CHICAGO ILL**

29 **60610**

30 **COOK**

3. Date Incorporated or Qualified

03/19/1996

4. FEI Number

36-3716776

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE
 NAME **P BERG, KEVIN**
 STREET ADDRESS **840 N LASALLE, SUITE 350**
 CITY-ST-ZIP **CHICAGO IL**

TITLE DELETE
 NAME **C GORDON, GINGER**
 STREET ADDRESS **840 N LASALLE, SUITE 350**
 CITY-ST-ZIP **CHICAGO IL**

TITLE DELETE
 NAME **VP BLATTER, MICHAEL**
 STREET ADDRESS **840 N LASALLE, SUITE 350**
 CITY-ST-ZIP **CHICAGO IL**

TITLE DELETE
 NAME **S BERG, RICHARD**
 STREET ADDRESS **840 N LASALLE, SUITE 350**
 CITY-ST-ZIP **CHICAGO IL**

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition
 1.2 NAME
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

3.1 TITLE Change Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

4.1 TITLE Change Addition
 4.2 NAME
 4.3 STREET ADDRESS
 4.4 CITY-ST-ZIP

5.1 TITLE Change Addition
 5.2 NAME **Secretary BERG, STEVEN**
 5.3 STREET ADDRESS **640 N. LaSalle, Suite 350**
 5.4 CITY-ST-ZIP **CHICAGO IL**

6.1 TITLE Change Addition
 6.2 NAME
 6.3 STREET ADDRESS
 6.4 CITY-ST-ZIP

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.

SIGNATURE:

4/6/98 312 489-9400

CR2E034 (10/97)