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

PROFIT ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F96000002613 (5)

AMERICAN INVSCO REALTY, INC.



FILED May 06 1998 8:00am Secretary of State



Principal Place	of Business	Maiting Address	aiting Address			, 4, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	SHORE DR #201		505 N LAKE SHORE DR #201		ļ		
CHICAGO IL 80811		CHICAGO IL 60611	CHICAGO IL 60611		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	3 STACE	
					05/24/1996		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For
21		26	26		36-2703544		ot Applicable
Sulte, Apt. (#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	
22		27	27		5. Cermicate of status besited	Fee Re	equired
City & State		City & State	City & State		Election Campaign Financing		May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zφ	Countr	У	8. This corporation owes or has paid the		_ ~
24	25	29	30		Personal Property Tax due June 30.		_] No
	9. Name and Address of Curre		8.	I Name	10. Name and Address of New Register	a Agent	
	PRENTICE-HALL CORPORAT	ION SYSTEM, INC.	•	Name			
	1 HAYS STREET		82 Street Ad		Idress (P.O. Box Number is Not Acceptable)		
	TE 105		-	ļ			
TAL	LAHASSEE FL 32301		8:	'			
			84	City	-	. 85 Zip	Code
					-	L os zip	
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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE .					Nired when reinstaling) DAT(
				gent signature req	ADDITIONS/CHANGES TO OFFICERS A		2S IN 12
12.	D	DELETE	13.		ADDITIONAL OF THE CONTROL OF THE CON	Change	Addition
NAME	GOULETAS, NICHOLAS S	C orrest	1.2 NAME				
STREET ADDRESS	505 N LAKE SHORE DR #2	M 1		ET ADDRESS			
·	CHICAGO IL 60611		1.4 CITY	i			ł
CITY-ST-ZIP	DP	DELETE	2.1 TITLE			Change	Addition
NAME	AND RETAIN THAT INC.		2.2 NAME			•	_
STREET ADDRESS	505 N LAKE SHORE DR #2	101		ET ADDRESS			
	CHICAGO IL 60611	•	2. 4 CITY				ļ
CITY-ST-ZIP TITLE	V	DELETE 3.1				Change	Addition
NAME	A DATE OF THE STATE OF THE STAT		3.2 NAME				
STREET ADDRESS	505 N LAKE SHORE DR #201			ET ADDRESS			
CITY-ST-ZIP	CHICAGO IL 60611		3.4. CITY				
TITLE	V	DELETE	4.1 TITLE			Change	Addition
NAME	ELLBOGEN, JEANNE		4. 2 NAM	1			
STREET ADDRESS	505 N LAKE SHORE DR #2	201		E1 ADDRESS			
CITY-ST-ZIP	CHICAGO IL 60611	100 to 0 H 00044		-ST-ZIP			
TITLE	D	DELETE	5.1 TITLE			Change	Addition
NAME	RIZZO, SHARON		5.2 NAME				
STREET ADDRESS	FOR NICHAEL OLIODE DD 4004			ET ADDRESS			
CITY-ST-ZIP	CHICAGO IL 60611		5.4 CHTY-				
TITLE	D	DELETE	6.1 TITLE			Change	Addition
NAME	ZAFER, MARTHA		6.2 NAMI			-	
STREET ADDRESS	505 N LAKE SHORE DR #2	201		ET ADDRESS		•	
	CHICAGO IL 60611	· ·	6.4 CITY				[
CITY-ST-ZIP	PHONO IL VIVII		D4 UITY	91-11F	i- Castina 110 07/3\/i\ Florido Statutan I furtho	contifue that the	

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 informatic 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, 900 an attachment without address.