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

PROFIT ORPORATION NUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 10 1997 8:00am

Secretary of State

0500218

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

OCUMENT # F96000003862 (7)

PARASOURCE, INC.

SIGNATURE:

PARASU	onoe, ino.				1 163 H21 (July 10 H2 4 H1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	46101 84101 114101	ONE: OLIVE BOOK	8 HOL 1801
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Principal Place of Business Mailing Address					I IDDNING THE SOME DISK OFFIL BOW TEST BEIN DOING SIED SOUR DING HEN ISDN			
2732 HAMPTON PKWY., STE. D-1 2732 HAMPTON PKWY., STE. EVANSTON IL 60201-1841			. D-1					
					3. Date Incorporated or Qualific 07/30/1996	d 3a. Da	te of Last R	leport
2. Principal P	lace of Business \idge Avenue	2a. Mailing Address 2236 Ridge	Ave.	:	4. FEI Number		ļ	optied For
Suite, Apt		Suite, Apt. #, etc.			36-3931871			ot Applicable Additional
22		27			5. Certificate of Status Desired	Ш	+	equired
City & State 23 Evans	ston, Illinois	City & State Evanston, I	111in	ois	Election Campaign Financin Trust Fund Contribution	° 🖂		May Be to Fees
Zip	01 -2722 Country	Zip	Coun	lry	8. This corporation has liability			. 1 9 9.032,
24 6020	9. Name and Address of Current F	11	30		Florida Statutes 10. Name and Address of New	Pegistered A		·
DEA	S, WILLIAM J	Togracolou Agent		1 Name	IV. Numb and Address of from	Leading to S	- Anni	
	s, William J 5 RIVERSIDE BLVD.			Chant A	ddrana (D.O. Pou Niumbar in Nel Anna	atable)		
JACKSONVILLE FL 32207				82 Street Address (P.O. Box Number is Not Acceptable)				
				3	2			
			E	4 City	and the second s		85 Zip	Code
44.6	40-7-607-600		<u> </u>		**	FL	1	4
	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change was au ons of, Section 607.0505, Flor	thorized ida Statu	by the corpo tes.	ration's board of directors, I hereby a	cept the appo	ointment as	registered
SIGNATURE	Signature, typed or printed name of registered agent a	and line if applicable. (NOTE:	Registered	Igent signature re	quired when reinstating)	DATE		
12.	OFFICERS AND I		13.		ADDITIONS/CHANGES TO O	FICERS AND		
THLE	PS ANDON	☐ DELETE	1.1 Total		President		Change	Addition
NAME	Colen, Sandra 2732 Hampton Pkwy., Ste. D-	•	1.2 NAM	EET ADDRESS				
STREET ADDRESS City-St-Zip	EVANSTON IL 60201	•		-ST-ZIP				
TITLE	Cagan, Sandra	DELETE	2.1 TITL		President		Change	Addition
NAME	2236 Ridge Avenue		2.2 NAN	E				
STREET ADDRESS	Evanston, Illinois	s 60201 - 2722	2.3 STR	ET ADORESS				
CITY-ST-ZiP				/-ST-ZIP	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·		F-10 x 1000
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STREET ADDRESS				EET ADDRESS				
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NAME			4. 2 NA	· .				
STREET ADDRESS				EET ADDRESS				
CITY - ST - ZIP				-ST-ZIP				
TITLE		DELETE	5.1 TITL			* * * * *	Chaple	Addition
NAME			5.2 NAM	IE ;			11	11. 100
STREET ADDRESS			5.3 STR	EET ADDRESS			41	4111147
CITY-ST-ZIP				-ST-ZIP	<u> </u>			177
TITL !		DELETE	6.1 TITL	, 1			Change	L. Addition
NAME			6.2 NAM	i 1	_ k,			
STREET ADDRESS				ET ADDRESS	Dr 0. \$ 11.500			
CITY-ST-ZIP	by certify that the information supplied a	with this filing descent qualify	for the e	vernation sta	ted in Section 119 07(3Vi). Floride Ste	tutes further	certify that	the
informatio	find of the annual report of sup	pplemental annual report is tru	ie and ac	Curate and t	hat my signature shall have the same	legal effect as	If made un	der oath; that
am an o appears i	by certify that the information supplied won indicated on this annual report or supflicer or director of the corporation or the Block 12 or Block 13 if changed, or a	an attachment with an addr	ess.	ecole mis re	port as required by Chapter 607, Plotii	A SIGNORES AL	ig funt må i	IRITIO