

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005075

Entity Name: TENG & ASSOCIATES, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

205 N MICHIGAN AVE #3600
CHICAGO, IL 60601

New Principal Place of Business:

Current Mailing Address:

205 N MICHIGAN AVE #3600
CHICAGO, IL 60601

New Mailing Address:

FEI Number: 36-2491653

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: NEUMANM, TIM
Address: 5 RED HAWK DR.
City-St-Zip: OSWEGO, IL 60543

Title: V () Delete
Name: BUCHMAN, LAURENCE
Address: 2044 GREENSBORO
City-St-Zip: WHEATON, IL

Title: DST () Delete
Name: FLOERCHINGER, DONNA M
Address: 907 EDMORE CT.
City-St-Zip: EVANSTON, IL 60202

Title: P () Delete
Name: DVORAK, IVAN J
Address: 700 LAKE RD
City-St-Zip: LAKE FOREST, IL

Title: V () Delete
Name: NAIR, R SHANKAR PHD
Address: 442 E. NORTH WAKER STREET
City-St-Zip: CHICAGO, IL 60611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA M FLOERCHINGER

DST

05/01/2008

Electronic Signature of Signing Officer or Director

Date