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2002 UNIFORM BUSINESS REPORT (UBR)

Feb 18, 2002 8:00 am DOCUMENT # F97000005981 **Secretary of State** 1. Entity Name 02-18-2002 90165 044 ***150.00 ZINC REAL ESTATE CORP. Principal Place of Business Mailing Address 222 S RIVERSIDE PLAZA 222 S RIVERSIDE PLAZA 80027607 SUITE 1450: **SUITE 1450** CHICAGO IL 60606 CHICAGO IL 60606 3-1-5 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 36-4192380 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 8. 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME **ELOWE, JEFFREY S** STREET ADDRESS STREET ADDRESS 222 S. RIVERSIDE PLAZA, STE. 1450 CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60606 ☐ Change Addition TITLE DPT : ☐ Delete TITLE NAME NAME KORZEN, BRADFORD STREET ADDRESS STREET ADDRESS 9300 WILSHIRE BLVD., STE. 610 CITY-ST-ZIP CITY-ST-ZIP BEVERLY HILLS CA 90212 1.193 ☐ Delete TITLE ☐ Addition TITLE ΑV ☐ Change NAME NAME BURJEK, EDWARD STREET ADDRESS STREET ADDRESS 222 S. RIVERSIDE PLAZA, STE. 1450 CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60606 TITLE ☐ Addition TITLE ☐ Delete ☐ Channe NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address.

SIGNATURE:

312 669-1200