2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2006
Secretary of State

DOCUMENT# F98000006287

Entity Name: COHEN REALTY SERVICES, INC.

Current Principal Place of Business:

2 NORTH LASALLE ST., STE. 800
CHICAGO, IL 60602

New Principal Place of Business:

Current Mailing Address:

2 NORTH LASALLE ST., STE. 800
CHICAGO, IL 60602

New Mailing Address:

FEI Number: 36-3882407 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VPTS ( ) Delete
Name: KELLAM, PAM
Address: 2 NORTH LASALLE ST STE 800
City-St-Zip: CHICAGO, IL 60602

Title: DP ( ) Delete
Name: COHEN, JACK M
Address: 2 NORTH LASALLE ST., STE. 800
City-St-Zip: CHICAGO, IL 60602

Title: VP ( ) Delete
Name: WEIN, WILLIAM
Address: 2 NORTH LASALLE ST
City-St-Zip: CHICAGO, IL 60602

Title: VP ( ) Delete
Name: SPAYER, STEVE
Address: 2 NORTH LASALLE ST STE 800
City-St-Zip: CHICAGO, IL 60602

Title: VP ( ) Delete
Name: HART, NATHAN
Address: 2 NORTH LASALLE ST STE 800
City-St-Zip: CHICAGO, IL 60602

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 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: PAM KELLAM VP 02/28/2006

Electronic Signature of Signing Officer or Director — Date