

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90250 042 ***150.00

DOCUMENT # F99000002272

1. Entity Name

MYRCOM, INC.



Principal Place of Business

15410 HENRY RD.
HOUSTON TX 77060

Mailing Address

1701 W. GOLF RD., SUITE 1012
TOWER III
ROLLING MEADOWS IL 60008

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE

CR2E034 (11/03)

4. FEI Number

76-0603656

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME GREEN, WILLIAM H ☐ Delete
STREET ADDRESS 1701 W. GOLF RD., STE 1012
CITY-ST-ZIP ROLLING MEADOWS IL 60008

TITLE SD
NAME ORNDAHL, MICHAEL L ☐ Delete
STREET ADDRESS 1701 W. GOLF RD., STE 1012
CITY-ST-ZIP ROLLING MEADOWS IL 60008

TITLE TD
NAME MEDICI, GREG R ☐ Delete
STREET ADDRESS 1701 W GOLF RD STE 1012
CITY-ST-ZIP ROLLING MEADOWS IL 60008

TITLE C
NAME KOERTNER, WILLIAM A ☐ Delete
STREET ADDRESS 1701 W. GOLF RD., STE 1012
CITY-ST-ZIP ROLLING MEADOWS IL 60008

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME *Marco Martinez*
STREET ADDRESS *1701 W. Golf Rd. Ste 1012*
CITY-ST-ZIP *Rolling Meadows IL 60008*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/04

Date

(847) 290-1891

Daytime Phone #