

2000 UNIFORM BUSINESS REPORT (UBR)

PG 182
APPROVED
AND
FILED

01 JUL -6 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # F99000004829

1. Entity Name
eziaz inc.

Principal Place of Business 8 Penn Center 2nd Floor Philadelphia, PA 19103	Mailing Address 8 Penn Center 2nd Floor Philadelphia, PA 19103
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 23-3000491	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

7. Name and Address of New Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
City Tallahassee FL Zip Code 32301

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 Laura R. Dunlap **Laura R. Dunlap**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) **as its agent** DATE 7/6/01

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	See attachment <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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, with all other like empowered.

SIGNATURE: Authorized Representative **Authorized Representative** 6/23/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

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eziaz inc.

Attachment to State of Florida
Uniform Business Report (UBR)

Item 11 – Officers and directors prior to dissolution

<i>Name</i>	<i>Title</i>	<i>Address</i>
Deborah L. Lenart	President, CEO & Director	550 W. Van Buren Chicago, IL 60607
Mark A. Chudzinski	Sr. Vice President & Secretary	550 W. Van Buren Chicago, IL 60607
John B. Gibson	Sr. Vice President – Sales/Service	550 W. Van Buren Chicago, IL 60607
Patrick J. O'Malley	Treasurer	550 W. Van Buren Chicago, IL 60607
Robert Hoff	Director	18552 MacArthur Blvd. Suite 400 Irvine, CA 92612



ACCOUNT NO. : 072100000032

REFERENCE : 209918 4327236

AUTHORIZATION :

COST LIMIT : \$ 900.00

ORDER DATE : July 3, 2001

ORDER TIME : 2:02 PM

ORDER NO. : 209918-020

CUSTOMER NO: 4327236

CUSTOMER: Ms. Deb Connor
Gardner Carton & Douglas
Suite 3400
321 North Clark Street
Chicago, IL 60610-4795

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2001 JUL -6 PM 3:22
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SUFFICIENCY OF FILING

REINSTATEMENT

NAME: EZIAZ INC.

*****FILE 1ST*****

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Darlene Ward

EXAMINER'S INITIALS _____