

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90044 036 ***150.00

DOCUMENT # F99000006317

1. Entity Name
ROYAL BUYING GROUP, INC.



Principal Place of Business
2 SALT CREEK LANE
SUITE 216
HINSDALE IL 60521
US

Mailing Address
2 SALT CREEK LANE
SUITE 216
HINSDALE IL 60521
US

30000010



2. Principal Place of Business
12 SALT CREEK LANE

3. Mailing Address
12 SALT CREEK LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 450

SUITE 450

City & State

City & State

HINSDALE, IL

HINSDALE, IL

Zip
60521

Country
US

Zip
60521

Country
US

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **36-4028848**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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, 2003 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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
ZIELINSKI, MICHAEL E
18453 RIDGEWOOD AVE.
LANSING IL 60438

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
GMEINER, MARTY
435 N. MADISON ST
HINSDALE IL 60521

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
HILL, MARK
11 S. 012 MADISON
BURR RIDGE IL 60521

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
RAZOWSKY, ROBERT
344 WOODLAND RD
HIGHLAND PARK IL 60035

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
JUCKNISS, ROBERT
35 E. SANDPIPER LANE
LAKE FOREST IL 60045

☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
BUTTSLOFF, WILLIAM
1923 MISSION HILL LANE
NORTHBROOK IL 60062

☐ Delete

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

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 REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-03

630-986-5416

Date

Daytime Phone #

CR2E034 (10/02)