

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**

**Apr 23 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # H34122 (2)

1. Corporation Name  
**PECCI, INC.**



Principal Place of Business: ~~2515 W. 35TH STREET CHICAGO IL~~

Mailing Address: ~~2515 W. 35TH STREET CHICAGO IL~~

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/14/1984**

4. FEI Number: **36-3335201** Applied For:  Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

21. Principal Place of Business: **5301 S. CICERO**

22. Suite, Apt. #, etc.: **SUITE 209**

23. City & State: **CHICAGO IL**

24. Zip: **60632** 25. Country: **USA**

26. Mailing Address: **5301 S. CICERO**

27. Suite, Apt. #, etc.: **SUITE 209**

28. City & State: **CHICAGO IL**

29. Zip: **60632** 30. Country: **USA**

9. Name and Address of Current Registered Agent: **CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
<input type="checkbox"/> DELETE	<b>DPT DALEY, JOHN F. 2515 W. 35TH ST. CHICAGO IL</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> DELETE	<b>D EKKEBUS, CYRIL 2515 W. 35TH ST. CHICAGO IL</b>	2.1 TITLE	2.2 NAME
<input type="checkbox"/> DELETE	<b>DS DALEY, RICHARD J. 180 N. LASALLE ST. CHICAGO IL</b>	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP
<input type="checkbox"/> DELETE	<b>TREASURER FRED W MEYER III 141 BARTRAM ROAD RIVERSIDE IL 60546</b>	3.1 TITLE	3.2 NAME
<input type="checkbox"/> DELETE		3.3 STREET ADDRESS	3.4 CITY - ST - ZIP
<input type="checkbox"/> DELETE		4.1 TITLE	4.2 NAME
<input type="checkbox"/> DELETE		4.3 STREET ADDRESS	4.4 CITY - ST - ZIP
<input type="checkbox"/> DELETE		5.1 TITLE	5.2 NAME
<input type="checkbox"/> DELETE		5.3 STREET ADDRESS	5.4 CITY - ST - ZIP
<input type="checkbox"/> DELETE		6.1 TITLE	6.2 NAME
<input type="checkbox"/> DELETE		6.3 STREET ADDRESS	6.4 CITY - ST - ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_

CR2E034 (10/97)