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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90188 018 ***150.00

DOCUMENT # P02301

 Corporation 	NAME PUZSU I						
Principal Place	e of Business	Mailing Address				.II #1#11 #1#11 #1#11 #1	#11 #1#11 (##1
77 WEST SEEGERS ROAD 77 WEST SEEGERS ROAD ARLINGTON HEIGHTS IL 60005 ARLINGTON IL 60005							
US US				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 06/06/1984		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Apr	plied For
21		26			NOT APPLICABLE		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
22		27				Fee Rec	<u>-:</u>
City & State	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 (Added to	
Zip 24	Country 25	Zip ::	Country 30	/	This corporation owes the current year Personal Property Tax.		□No
<u></u>	9. Name and Address of Curre				10. Name and Address of New Register	ed Agent	
			81	Name			
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
	TATION FL 33324		83				
				C.4.		. 85 Zip C	`ode
			84	City	F	FL 83 210 C	,000
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig Signature, typed or printed name of registered agents.	e of Florida. Such change was au lations of, Section 607.0505, Flori	ithorized by ida Statutes	the corporati s.	poration submits this statement for the purpose on's board of directors. I hereby accept the appearance of the purpose of the	opoiniment as reg	jistered
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	
TITLE	PD	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	Gurtz, Gerald		1.2 NAME				
STREET ADDRESS	77 WEST SEEGERS ROAD		1.3 STREE	T ADDRESS			
CITY-ST-ZIP	ARLINGTON IL		1.4 CITY-5	ST-ZIP			
TITLE	SD	☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	GURTZ, FRANK		2.2 NAME				
STREET ADDRESS	77 WEST SEEGERS ROAD		2.3 STREE	TADDRESS		, at .	
CITY-ST-ZIP	ARLINGTON HEIGHTS IL		2. 4 CITY-	ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME		·		
STREET ADDRESS			3.3 STREE	T ADORESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4,1 TITLE	1		Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			·
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME	•		6.2 NAME				
STREET ADDRESS	Ì		6.3 STREE	ET ADDRESS	,		

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; with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/05/99

847-734-2400

ne Phone #

:R2E034 (11/98)