FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 29, 2002 8:00 am Secretary of State DOCUMENT # P04524 1. Entity Name 04-29-2002 90058 042 ***150 HFC COMMERCIAL REALTY, INC. Principal Place of Business Mailing Address 2700 SANDERS RD 2700 SANDERS RD 2700 SANDERS ROAD TAX-2 SOUTH PROSPECT HEIGHTS IL 60070 PROSPECT HEIGHTS IL 60070 UŞ 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 36-3334821 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE □ Delete TITLE Change ☐ Addition NAME DELUCA, M. A. NAME STREET ADDRESS 2700 SANDERS ROAD STREET ADDRESS CITY-ST-ZIP PROSPECT HEIGHTS IL CITY-ST-ZIP TITLE AS ☐ Defete TITLE Change ☐ Addition ANGELO, J.M. NAME NAME STREET ADDRESS 2700 SANDERS ROAD STREET ADDRESS CITY-ST-ZIP PROSPECT HEIGHTS IL CITY-ST-ZIP ☐ Delete PD TITLE Change ☐ Addition NAME KLUG, LC NAME STREET ADDRESS STREET ADDRESS 2700 SANDERS RD CITY-ST-ZIP CITY-ST-ZIP PROSPECT HEIGHTS IL via president TITLE ☐ Delete TITLE Change ☐ Addition NAME MORRIS, L T NAME morris, L.J. STREET ADDRESS 2700 SANDERS ROAD STREET ADDRESS CITY-ST-7IP PROSPECT HEIGHTS IL CITY-ST-ZIP TITLE N Delete TITLE Addition (NAME FREIDRICH, D.A. STREET ADDRESS 2700 SNADERS ROAD STREET ADDRESS CITY-ST-ZIP PROSPECT HEIGHTS IL 60270 CITY-ST-ZIP TITLE SGC Delete TITLE Addition Addition NAME SCHWARTZ, P D NAME mulkason y STREET ADDRESS 2700 SANDERS RD STREET ADDRESS 700 CITY-ST-7IP PROSPECT HEIGHTS IL 60070 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Flefida 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 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR & SOUTH STATE OF DAYS DAYS Phone #