

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000141107

Entity Name: JEAN NIEL, INC.

FILED  
Jan 15, 2008  
Secretary of State

## Current Principal Place of Business:

70 W MADISON ST  
STE 5750  
CHICAGO, IL 60602

## New Principal Place of Business:

70 W. MADISON STREET  
SUITE 5750  
CHICAGO, IL 60602

## Current Mailing Address:

% THOMAS H THORELLI  
70 W MADISON ST - STE 5750  
CHICAGO, IL 606024213

## New Mailing Address:

% THOMAS H THORELLI  
70 W MADISON ST - STE 5750  
CHICAGO, IL 60602

FEI Number: 20-3680895

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: DE BOUTINY, ANTOINE  
Address: 70 W MADISON ST., SUITE 5750  
City-St-Zip: CHICAGO, IL 60602

Title: VP ( ) Delete  
Name: UZAN, MICHAEL  
Address: 70 W MADISON ST., SUITE 5750  
City-St-Zip: CHICAGO, IL 60602

Title: S ( ) Delete  
Name: THORELLI, THOMAS H  
Address: 70 W MADISON ST., SUITE 5750  
City-St-Zip: CHICAGO, IL 60602

Title: TD ( ) Delete  
Name: VOYNNET, MARIE C  
Address: 70 W MADISON ST., SUITE 5750  
City-St-Zip: CHICAGO, IL 60602

Title: AS ( ) Delete  
Name: GUEMBOURA, THIERRY  
Address: 70 W MADISON ST., SUITE 5750  
City-St-Zip: CHICAGO, IL 60602

Title: D ( ) Delete  
Name: DE BOUTINY, MARIE  
Address: 70 W MADISON ST., SUITE 5750  
City-St-Zip: CHICAGO, IL 60602

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS H. THORELLI

S

01/15/2008

Electronic Signature of Signing Officer or Director

Date