## 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 Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90104 032 \*\*\*150.00

## **DOCUMENT # P10349**

Corporation Name

EASTERN ELECTRIC APPARATUS REPAIR COMPANY, INC.

enncipal elac	e or business	Mailing Address										
30 E RANDOLI CHICAGO IL 60	PH ST. STE 2900 601-6207	130 E RANDOLPH ST. STE 2900 CHICAGO IL 60601-6207										
IS		US					DO NOT WRITE IN THIS SPACE					
						1	3. Date Incorpora				}	
							06/06/1986	ີ				
Principal Place of Business     2a. Mailing Address							4. FEI Number			A	pplied For	
26						- 1	58-1667633	3		N	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.							\$8.75	Additional	
		27	.]				5. Certifcate of S	status Desireo		Fee R	equired	
City & Stat	e	City & State					6. Election Camp	paign Financing		\$5.00	May Be	
.]		28	В				Trust Fund Co				to Fees	
<sup>¹</sup> Żip	Country	Zip				į	8. This corporation	on owes the curr	ent vear Inta	angible	į	
.!	25	29	30				Personal Prop		,	∐Yes	<b>X</b> No	
	9. Name and Address of Current F		,			<u>'</u> .	10. Name and Ac	ddress of New R	Registered A	Agent		
				81	Name							
THE PRENTICE HALL CORPORATION SYSTEM, INC.					<u> </u>		<del></del>					
1201	HAYS STREET		8:			Street Address (P.O. Box Number is Not Acceptable)						
TALLAHASSEE FL 32301				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												
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		<u> </u>	
Signature, typed or printed name of registered agent and title if applicable (NOTE: Register 2. OFFICERS AND DIRECTORS 13					signature r	equired wh		HANGES TO OF		D DIRECTO	DDS IN 12	
IITLE	PCEO	DELETE	1.1 T			l	ADDITIONS/CF	ANGES TO OF	FICERS AN	☐ Change	Addition	
			1							□ change	Addition	
NAME				IAME								
STREET ADDRESS	130 E RANDOLPH ST, STE 2900			1.3 STREET ADORESS								
CITY-ST-ZIP	<b></b>		1.4 CITY-ST-ZIP						Channa	☐ Addition		
MLE	VP	C) OFFE IF	2.1 TITLE							Change	☐ Addition	
IAME			AME							j		
STREET ADDRESS	30 E RANDOLPH ST, STE 2900		2.3 S	2.3 STREET ADDRESS								
CITY-ST-ZIP	CHICAGO IL 60601-6207	_	i		CITY-ST-ZIP							
TITLE			3.1 T	3.1 TITLE						☐ Change	☐ Addition	
IAME	CHILD, BRADLEY		3.2 N	3.2 NAME		_						
STREET ADDRESS	130 E RANDOLPH ST, STE 2900		3.3 S	3.3 STREET ADDRESS								
CITY-ST-ZIP	CHICAGO IL 60601-6207		3.4. 0	CITY-ST	ZIP							
ΠLE	\$	☐ DELETE	4.1 T	ITLE						Change	☐ Addition	
AME	FITZPATRICK, THOMAS		4.21	NAME								
STREET ADDRESS	130 E RANDOLPH ST, STE 2900		4.3 S	TREET.	ADDRESS	Ì					j	
CITY-ST-ZIP	CHICAGO IL 60601-6207		4.40	ITY-ST	- ZIP						ļ	
TTLE	VPCF	□ DELETE	5.1 T	ITLE		ĺ				Change	☐ Addition	
IAME	SALADINO, JOHN A.			AME								
TREET ADDRESS	130 E RANDOLPH ST, STE 2900		5.3 S	TREET	ADDRESS							
CITY-ST-ZIP	CHICAGO IL		5.4 C	ITY-ST	-ZIP							
TTLE	T	☐ DELETE	6.1 T			VICE	PRESIDENT	1 TREASUR	RER	<b>™</b> Change	Addition	
AME	HELME, JOSEPH W JR		6.2 N	AME				,		<del>-</del>	_	
TREET ADDRESS	130 E RANDOLPH ST, STE 2900		6.3 S	TREET	ADDRESS							
IIILLI ADDNESS	100 L 18/11/0/11 11 01, 016 2300					i						

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 suppliemental 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:

CITY-ST-ZIP

CHICAGO IL 60601-6207

SNATURE AND TYPE DE PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1-8-99

3.2 2284400

aytime Phone #