

PAY NOW: FILING FEE AFTER MAY 1 IS \$225

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORAT

FILED  
May 01 1996 8:00 am  
Secretary of State

DOCUMENT # P19991

(9)

1. Corporation Name

PREMIERE MANUFACTURING, INC.

Principal Place of Business

1717 DEERFIELD ROAD  
DEERFIELD IL 60015

Mailing Address

1717 DEERFIELD ROAD  
DEERFIELD IL 60015



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

3. Date Incorporated or Qualified

07/08/1988

3a. Date of Last Rep

05/01/1995

4. FEI Number

36-3534063

App

Not

5. Certificate of Status Desired

☐

\$8.75 Ac

Fee Req

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 Ac

Added to

8. This corporation has liability for intangible tax under s. 195  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

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

83

84 City

FL

85

Zip Code

10. Name and Address of New Registered Agent

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 agent, 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
	DVFO	SKATOFF, LAWRENCE B	1717 DEERFIELD RD. DEERFIELD IL	
	VDS	COSTIGAN, JOHN M.	671 NEWCASTLE DR. LAKE FOREST IL	
	ASD	ROEHLK, THOMAS M.	705 HUNTER ROAD GLENVIEW IL	
	VP	VAN SICKLE, PAUL B	3175 N ORANGE BLOSSOM TL KISSIMMEE FL	
	P	RINGLER, JAMES M	1717 DEERFIELD RD DEERFIELD FL	
				<input type="checkbox"/> DELETE

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Add

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 I had sworn 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #