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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P21341 (3)

1. Corporation Name

BRAND CONSTRUCTION SERVICES, INC.



Principal Place of Business

3003 BUTTERFIELD ROAD
OAK BROOK IL 60521

Mailing Address

ATTN: BARBARA BIER
3003 BUTTERFIELD ROAD
OAK BROOK IL 60521

3. Date Incorporated or Qualified
10/19/1988

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

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 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 607.0506, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and chairman of board)

(NOTE: Registered Agent Signature required when changing office)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BARNHART, VICTOR J	
STREET ADDRESS	3003 BUTTERFIELD ROAD	
CITY-STATE-ZIP	OAK BROOK IL 60521	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GILBERT, RODNEY C	
STREET ADDRESS	3003 BUTTERFIELD ROAD	
CITY-STATE-ZIP	OAK BROOK IL 60521	
TITLE	VDS	<input type="checkbox"/> DELETE
NAME	MEACHUM, RODNEY C	
STREET ADDRESS	3003 BUTTERFIELD ROAD	
CITY-STATE-ZIP	OAK BROOK IL 60521	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	SHERMAN, STEVEN P	
STREET ADDRESS	3003 BUTTERFIELD ROAD	
CITY-STATE-ZIP	OAK BROOK IL 60521	
TITLE	T	<input type="checkbox"/> DELETE
NAME	BROWN, MICHAEL T	
STREET ADDRESS	3003 BUTTERFIELD ROAD	
CITY-STATE-ZIP	OAK BROOK IL 60521	
TITLE	AS	<input type="checkbox"/> DELETE
NAME	BIER, BARBARA L	
STREET ADDRESS	3003 BUTTERFIELD ROAD	
CITY-STATE-ZIP	OAK BROOK IL 60521	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	VDS
3.3 STREET ADDRESS	John Meachum
3.4 CITY-STATE-ZIP	3003 Butterfield Road
	Oak Brook, IL 60521
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

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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 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.

SIGNATURE: Barbara L. Bier Barbara L. Bier, Assistant Secretary 4/1/96 708/572-8841
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)