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**

DOCUMENT # P21938 1. Corporation Name

JERBO HOLDINGS I, INC.

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90075 008 ***150.00



	· · · · · · · · ·			A LOS COM LEG STORE LEGIS STATE CONTROL OF C
Principal Place	e of Business	Mailing Address		
633 SKOKIE BLVD SUITE #206 633 SKOKIE BLVD SUITE # NORTHBROOK IL 60062 NORTHBROOK IL 60062				
NORTHBROOK IL 60062		NONTHONOUN IL 00002		DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				12/01/1988
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number Applied For
_ `	Sidowinder Dr	26 1725 Sidewin	day Dr	36-3617004 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			<u> </u>	5. Certificate of Status Desired \$8.75 Additional
22 Sui	te 1000	27 Suite: 100		5. Certificate of Status Desired Fee Required
City & Stat		City & State		6. Election Campaign Financing \$5.00 May Be
23 taki	c City UT	28 Park City	uı	Trust Fund Contribution Added to Fees
. Zip	Country	L_, -,	untry	8. This corporation owes the current year Intangible
24 840	60 25 USA	29 84060 30	400 H	Personal Property Tax. ☐ Yes ☑ No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent
OT CORROBATION SYSTEM			81 Name	•
CT CORPORATION SYSTEM			82 Street A	address (P.O. Box Number is Not Acceptable)
1200 S. PINE ISLAND ROAD				
PLAN	NTATION FL 33324		83	
			84 City	85 Zip Code
			'	FL
office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of im familiar with, and accept the obligation	Florida. Such change was authorize	ea by the corpo	corporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered
SIGNATURE		, , , , , , , , , , , , , , , , , , , ,		
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Registere	ed Agent signature re-	quired when reinstating) DATE
12.	OFFICERS AND			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD	DELETE 1.11	- 1	Change Addition
NAME	REINSDORF, JERRY M.	1.21	NAME	Reinsdorf, Jerry M. Suite 1000
STREET ADDRESS	633 SKOKIE BLVD SUITE #206	1.33	STREET ADDRESS	1725 Sidewinder Dr.
CITY-ST-ZIP	NORTHBROOK IL 60062	1.4	CITY-ST-ZIP	Park City UT 84060
TITLE	VSD	DELETE 2.1		V.S.D Change Addition
NAME	JUDELSON, ROBERT A.	2.21	NAME	Judelson, Robert A. E de mas
STREET ADDRESS	633 SKOKIE BLVD SUITE #206	2.3	STREET ADDRESS	Judelson, Robert A. 1725 Sidewindon Drive Suite 1000
CITY-ST-ZIP	NORTHBROOK IL 60062	2.4	CITY-ST-ZIP	TARL CIM UT 89060
TITLE	AS	DELETE 3.1	πιε	☐ Change ☐ Addition
NAME	PENNER, GERALD M.	3.21	NAME	
STREET ADDRESS	525 WEST MONROE ST.#1600	3.33	STREET ADDRESS	
CITY-ST-ZIP	CHICAGO IL 60661		CITY-ST-ZIP	
TITLE	AS		me	A 5 ☐ Change ☐ Addition
NAME	CHANESS, LARRY	4.2	NAME :	chances, harry
STREET ADDRESS	AND DIVOVIE BLUD CUITE #000		STREET ADDRESS	Chaness, harry 1725 Sidewinder Dr. Suite 1000
	NORTHBROOK IL 60062		CITY-ST-ZIP	
CITY-ST-ZIP TITLE	TOTAL DESIGNATION OF THE POSSES		TIRLE	Par City UT 84060
			NAME	
NAME	1		STREET ADDRESS	
STREET ADDRESS			CITY-ST-ZIP	
CITY-ST-ZIP			TITLE	☐ Change ☐ Addition
TITLE			NAME	C arrondo C vidada
NAME	1		į	
STREET ADDRESS			STREET ADORESS	
CITY OT 71D		6.4	CITY-ST-ZIP	

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 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 attackment with an address, with all other like empowered.