FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P23327

(0)

WHYTE & WHYTE IMPORTERS, LTD.

FILED	
May 09 1997 8:00am	1
Secretary of State	

Principal Place	e of Business	Mailing Address	Mailing Address				
1000 N. HALST	TED	1000 N. HALSTED					
STE 205 CHICAGO (L 60	0622	STE 205 CHICAGO IL 60622-42	50				
US	yy==	US			3. Date Incorporated or Qualified	3a. Date of La	•
					03/08/1989	04/30/199	96
	lace of Business	2a. Mailing Address			4. FEI Number	ļ	Applied For
21		26			36-3425661 Not Applicable		
Sulte, Apt. #, etc.		<u></u> ⊢-¬ '	Suite, Apt. #, etc.		5. Certificate of Status Desired	4	75 Additional
22	<u> </u>	27					e Required
City & State		[- ····]	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23 Zip	Country	7in	Count				
24	25	29			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes \(\square\) Yes \(\square\) No		
24	9. Name and Address of Currer				10. Name and Address of New Re		
VEH	M, TOM		8	1 Name			
	STATE ROAD 434						
	AMONTE SPRINGS FL 32714		8	Z Street Add	ress (P.O. Box Number is Not Acceptal	Die)	
ALI	AMORITE OF MINOS PE SEFT		8	3			
							تنصفت تتاما والرو
			8	4 City		FL 85	Zip Code
11. Pursuant	to the provisions of Sections 607 056	02 and 607 1508. Florida S	tatutes, the abo		poration submits this statement for the i		na its reaistered
office or r	registered agent, or both, in the State	of Florida. Such change v	vas authorized	by the corpora	poration submits this statement for the parties to be presented as the parties of directors. I hereby acce	pt the appointmer	it as registered
	m familiar with, and accept the oblig	jations of, Section 607.050	5, Honda Statut	es.			
SIGNATURE	Signalure, typed or prailed name of registered ag	ent and tor if applicable	(NOTE Registered /	lgent signature requi	red when reinstaling)	IIAd	
12.		ID DIRECTORS	1 13.	·········	ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC	TORS IN 12
TITLE	PĎ	DELETE	11100			Cha	nge 🔲 Addition
NAME	LASKY, HOWARD J.		1.2 NAM	E			
STREET ADDRESS	18001 HUNTINGTON BLVD		1.3 STHE	ET ADDRESS	059 W. Huzon ST Hicago IL 606		
CITY-ST-ZIP	HOFFMAN ESTATES IL		1.4 CITY	-S1-ZIP	.Hicago IL 606	vv	
TITLE	8	DELETE	2.1 101.1			Cha	nge 🔲 Addition
NAME	BLUMENFELD, JEFFREY		2.2 NAM	E			
STREET ADDRESS	2626 N LAKEVIEW		2.8 S1RE	EET ADDRESS			
CITY-ST-ZIP	CHICAGO IL		2 4 011	Y-S1-ZIP			
TITLE		DELFTE	3.1 1111	f	- *	⊷ ☐ Cha	nge 🔲 Addition
NAME			3.2 NAM	iE			
STREET ADDRESS			3. 3 STRI	ET ADDRESS			
CITY-ST-ZIP			3.4. C(1	r - \$1 - 21P			
TITLE		DELETE				Cha	nge 🔲 Addition
NAME			4 2 NAM	AE			
STREET ADDRESS			4 3 S1RI	ET ADDRESS			
CITY-ST-ZIP				'-S1-7IP			
TITLE		☐ DELETE				Cha	inge 🔲 Addition
NAME			52 NAM	16			
STREET ADDRESS				ELT ADDRESS			
CITY-ST-ZIP				'-ST-ZIP			
TITLE		DELETE				Cha	inge 🔲 Addition
NAME			6.2 NAM				
STREET ADDRESS				EFT ADDRESS			
CITY-ST-ZIP		*****	■ 0.4 CHY	'-S1-ZIP			

14. I do 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 is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.