## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Aug 07, 2007 08:00 AN Secretary of State

1. Entity Nar	IMENT # P920000042	266		Secretary of S
Principal Pla 2287 S. BL 2287 S BLL CHICAGO, IL	JE ISLAND	Mailing Address 2287 S. BLUE ISLAND 2287 S BLUE ISLAND CHICAGO, IL 60608 US		
Γ	OO NOT WRITE	IN THIS SPA	CE	08032007 No Chg-P CR2E034 (11/05)  4. FEI Number Applied For
	_			36-3853858 Not Applica  5. Certificate of Status Desired \$8.75 Additional Fee Required
8. The above	e named entity submits this statement for littions of registered agent.	ne purpose of changing its register	ed office or registe	IN THIS SPACE  ered agent, or both, in the State of Florida. I am familiar with, and acco
	Signakue, typed or printed name of requisered agent and ILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	9. Election Campaign Fina Trust Fund Contribution.	~ ~	5.00 May Be ded to Fees U00000771639
10. HTLE NAME STREET ADDRESS CITY-ST-ZIP BILL NAME	OFFICERS AND DI PSTD NAGLE, MARK A 2287 S. BLUE ISLAND CHICAGO, IL	RECTORS		<del>'-08/07/67-80010-017-550.00</del>

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empoyabred.

SIGNATURE:

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY ST-ZIP

THE NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
ETILE

SNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Dayame Phone k