**FILED** 

May 11, 1999 8:00 am Secretary of State

05-11-1999 90031 040 \*\*\*150.00

A JURAJURA AND INIOR ALCOHOLISM DINAKA RUMAN MERAN MUNICI MAKEN MAKUN 1986 1985 1985 1880

### 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 # P9300005531

1. Corporation Name

Z.R.W. CORPORATION

}					1			)/ <b>88</b>
Principal Plac	e of Business	Mailing Address				t inntinnt iin inint utir anie anie karie karie k	tini niidi ni	fidt inter irer eter
710 N PLANKINTON 710 N PLANKINTON					}			
12TH FLOOR		12TH FLOOR				DO NOT WRITE IN THIS	00400	
MILWAUKEE WI 53203 MILWAUKEE WI 53203					<u> </u>	DO NOT WRITE IN THIS	SPACE	
					3.	Date Incorporated or Qualifed 01/25/1993		
2. Principal P	rincipal Place of Business 2a. Mailing Address				4.	FEI Number		Applied For
21	26				L	<u>39-1753819</u>		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5.	i. Certifcate of Status Desired	•	5 Additional Required	
City & State City & State						Election Campaign Financing	\$5.0	00 Мау Ве
23	28				Trust Fund Contribution		ed to Fees	
Zip	·		Country	Country		. This corporation owes the current year int	angible	
24	25 29 30		30		ļ	Personal Property Tax.	XX Yes	□No
	9. Name and Address of Current	Registered Agent			10	. Name and Address of New Registered	Agent	
								j
C T CORPORATION SYSTEM				Street /	Address (	P.O. Box Number is Not Acceptable)		
1200 S PINE ISLAND RD			82	- diest/	Addiess (i	7.0. Box Manpor Is Mat Madeplasia)		(
PLANTATION FL 33324			83					
Ì			104				7	Zip Code
	· · · · · · · · · · · · · · · · · · ·		84	City		FL	85 Z	ip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the					corporatio	on 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 607.0505, Florida Statutes.								s registered
1	irriginial will, and docopt the opigul	0110 011 0000011 001 100001 1 1011		,				1
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered				t signature re	required when	reinstating) DATE		
12.	OFFICERS AND DIRECTORS 13.		13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	TORS IN 12
TITLE	D	☐ DELETE 1.1 TI					☐ Chang	ge 🗌 Addition {
NAME	ZILBER, JOSEPH J			1.2 NAME SE		ATTACHED LIST FOR ADDITIONAL		f
STREET ADDRESS	710 N PLANKINTON AVE		1.3 STREET	1.3 STREET ADDRESS OF		CERS		ì
CITY-ST-ZIP	MILWAUKEE WI 53203		14 CITY-S	)-ZIP	}			
TITLE	DELETE 2.1 TI		2.1 TITLE				☐ Chang	ge
NAME	WIGCHERS, ARTHUR W. JR. 22N		2.2 NAME					
STREET ADDRESS	THE ST OF SAME TOUR STORY AND		2.3 STREET	ADDRESS	Ì			
CITY-ST-ZIP	BAN SALAS IVEE SALA		2.4 CITY-5	ļ	}			1
TITLE			3.1 TITLE				☐ Chang	ge Addition
NAME	STEIN, GERALD 32 N		3.2 NAME	i	İ			ľ
STREET ADDRESS	The Admir and the Property of		3.3 STREET	ADDRESS	i			j
CITY-ST-ZIP			34, CITY-8		}			}
TITLE	V	☐ DELETE	4.1 TITLE				Chang	ge Addition
NAME	JANZ, JAMES F		4. 2 NAME					}
	710 N PLANKINTON AVE			ADDRESS	ĺ			)
CITY-ST-ZIP	MILWAUKEE WI		4.4 CITY-S	, (, ]	ł			}
TITLE	VS	☐ DELETE	5.1 TITLE		<del> </del>		Chang	ge Addition
NAME	YOUNG, JAMES B		5.2 NAME	ļ	]		_ `	
STREET ADDRESS	710 N PLANKINTON AVE		5.3 STREET	ADDRESS				Ì
ľ	MILWAUKEE WI		5.4 CITY-S	í	{			-
CITY-ST-ZIP TITLE	<del></del>		5.1 TITLE		<del> </del>		☐ Chang	ge Addition
			6.2 NAME	1	}			, 100.001
NAME '	DUNNIS, UNINES U		1	1	1			1

14. 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 attachment with an address, with all other like empowered.

Mark S. Madigan Mark S. Madigan

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS 710 N PLANKINTON AVE

MILWAUKEE WI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Assistant Secretary 1/18/99 (414) 274-2433

Date

Daytime Phone #

# Z.R.W. CORPORATION, INC. DOCUMENT NO. P98000079166

544872-90031-40 #P4300005531

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#### OFFICERS:

V BRAUN, ROBERT E. 710 NORTH PLANKINTON AVENUE, #1200 MILWAUKEE, WI 53203

V GRANDLICH, JOHN R. 710 NORTH PLANKINTON AVENUE, #1200 MILWAUKEE, WI 53203

V LABBS, SUSAN K. 710 NORTH PLANKINTON AVENUE, #1200 MILWAUKEE, WI 53203

T CHEVALIER, STEPHAN J. 710 NORTH PLANKINTON AVENUE, #1200 MILWAUKEE, WI 53203

AS BENNETT, BRENDA 3000 N. ATLANTIC AVENUE, #205 COCOA BEACH, FL 32931

AS DELISLE, SANDRA J. 710 NORTH PLANKINTON AVENUE, #1200 MILWAUKEE, WI 53203

AS\_\_\_\_\_\_MADIGAN, MARK S.
710 NORTH PLANKINTON AVENUE, #1200
MILWAUKEE, WI 53203