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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P96000004158 (7)

IMPERIAL CLUB MANAGEMENT INC.

Principal Place of Business Mailing Address 900 WEST JACKSON 900 WEST JACKSON SUITE 7E SHITE 7E CHICAGO IL 60607-3090 CHICAGO IL 3. Date Incorporated or Qualified 3a. Date of Last Report 01/12/1996 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 36 - YUS 7079 21 Not Applicable 26 Suite, Apt. #, etc Suile, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Z_{iD} Conetry Zip 8. This corporation has liability for intangible tax under s. 199 032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** R3 84 Zip Code 11. Pursuant to the provisions of Scotions 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 it am fam has with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Sign at cell type it in printed in medicing to regulations again to according to a specifical fe-(NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1 | TITLE Director David Tassler 1.2 NAME **CR2E034** NAME 900 W. Jackson 76 STREET ADDRESS 1.3 STREET ADDRESS Chicago III. 60607 1.4 CITY - ST - ZIP CITY-ST ZP DELETE Change Addition T:11 F 2.1 TITLE **2.2 NAME** 2.3 STREET ADORESS STEELT ADDRESS CITY-ST ZIP 2 4 CITY - ST - ZIP DELETE Change Addition THE 3.1 TITLE 3.2 NAME NAM: STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST-ZIP DELETE Change Addition THLE 41 THUE 4. 2 NAME NASI 4.3 STREET ADDRESS STREET ADDRESS CITY: ST-7IP 4 4 CITY - ST-ZIP DELETE 5 1 TITLE Change Addition TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - \$1 - ZIP CITY-ST-ZIP DELETE Addition Change HILF 6.1 1111.6 NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST- Z(P

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

appears in Block 12 or Block 13 1 changed, or on an attachment with an address

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 inclicated 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

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FILED

Jan 16 1997 8:00am

Secretary of State

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