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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700006150 (1)

CHICAGO INVESTMENT GROUP, INC.

Principal Place of Business

Mailing Address

FILED Apr 23 1998 8:00am Secretary of State



4227 ENTERPRISE AVENUE BAY A NAPLES FL 34104		4227 ENTERPRISE AVENUE BAY A NAPLES FL 34104		DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified  01/22/1997
2. Principal Place of Business 21. 38/1 ENTSRIAISS Avg. 26. 38/1 ENT			tennace A	4. FEI Number Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.	EKIKI31 7	\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & State	LES , FLORIDA		LORIDA	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip 24 34/	Country 25 U.S.A.	·	Country 0 U.S.A	
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent CALVATOR: LEG 4  81 Name				
SALVATORI, LEO J				
4501 TAMIAMI: TRAIL NORTH SUITE 300			82 Street	Address (P.O. Box Number is Not Acceptable)
NAPLES FL 34103			83	<del> </del>
			84 City	■ 85 Zip Code
11. Pursuant to the provisions of Sections 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable (NO1£.	Registered Agent signatur	e required when reinstating) DATE
12.	OFFICERS AND I	DIRECTORS	13.	, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		☐ DELETE	1.1 TITLE	VICE PRESIDENT, SECY, Change Addition
NAME			1.2 NAME	JOSSEH KINOLON
STREET ADDRESS			1.3 STREET ADDRESS	JOSSEH KINOLON 2-S. 220 HAWTHORN LANE WHEATON /LL 60187 VICE PASSION / LL 60187
CITY-ST-ZIP TITLE		DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	1/1 C F (055/05/7   Change   Addition
NAME			2.2 NAME	ROBERT ABLEIDINGER
STREET ADDRESS			2.3 STREET ADDRESS	4519 CHEVAL BLUP,
CITY-ST-ZIP			2. 4 CITY-S1-ZIP	6412, FL. 33549
TITLE	-	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		[] DELE <b>te</b>	4.1 TOLE	L Change L Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	Change Addition
NAME			5.1 TILE 5.2 NAME	Change E Addition
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELET <b>e</b>	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

4. 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 suppliemental 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 any attachment with an address.

MILLO O HARRIST

Dea. 17 1900

Que 2/2 1.00