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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

	ANNU	JAL REPOR 1998	PORT Secretary of St			ry of State	State		Secretary of State
[ 1.		MENT # Name AND BAUE	P9700 R REALTY, IN		710 (8)				E MARTINETO AND IDEA; FROM DOME COME BOAR DOME CONTROL FROM FROM FROM COME
Principal Place of Business  524 SYCAMORE LANE WHEELING IL 60000			524 8	Mailing Address 524 SYCAMORE LANE WHEELING IL 60090				DO NOT WRITE IN THIS <b>S</b> PACE	
2.	2. Principal Place of Business 21 Suite, Apt. #, etc.			26	2a. Mailing Address 26 Suite, Apt. #, etc.				3. Date Incorporated or Qualified 10/24/1997 4. FEI Number S9-3486653 Not Applied For Not Applicable 5. Certificate of Status Desired \$8.75 Additional
22	City & State	28				Con	ntru		Fee Required  6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
24		25 9. Name and	Address of Curi	29		30	iiiiy		B. This corporation owes or has paid the current year Integable     Personal Property Tax due June 30. Yes No     No     Name and Address of New Registered Agent
l	395 TAI	53 <b>w</b> w Kelle <sup>.</sup> Ll <b>ah</b> assee Fi	32311		508, Florida Statut Such change was Iction 607.0505, Flo		82 83 84 nove	City	t Address (P.O. Box Number is Not Acceptable)    FL   85   Zip Code
12		Signatore, typed or pr	of LICERS A	agent and title if app AND DIRLCTO				ni signature	re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
11T NA STI		t.	12 13		1.2 NA 1.3 ST	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		SECRETARY BAUER Addition	
TIT NAI STI	LE Me Reet address	E E			DELETE 2.1 T 22 N 2.3 S		LF ME REE1 .	ADDRESS	Change Addition
TIT NA STE	TITLE VAME STREET ADDRESS CITY-ST-ZIP				DETE 3-31 32 33		2. 4 CITY - ST-ZIP 31 TITLE 32 NAME 3.3 STREET ADDRESS 3.4. CITY - ST-ZIP		Change Addition
TH NA STI	LE ME REET ADDRESS	ADDRESS			DELETE		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		Change Addition
TIT NA STE	me Reet alidress	DELETE 5 5 5 5		5.1 TU 5.2 NA 5.3 S1	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-S1-ZIP		Change Addition		
TITI NA	l.				DELETE	6.1 TIT 6.2 NA	LE ME	ADDRESS	Change Addition

CHY-S1-7IP

14. Thereby 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.

CATHU BRUER

847-215-9049

**FILED** 

Aug 12 1998 8:00am