## 2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment

## FILED Mar 13, 2001 8:00 am DOCUMENT # **S96995** 1. Entity Name **Secretary of State** PRELUDE CHARTERS, INC. 03-13-2001 90001 018 \*\*\*150.00 Principal Place of Business Mailing Address 300 S. BISCAYNE BLVD., STE 800 222 N. LASALLE STREET., #300 MIAMI FL 33131 CHICAGO IL 60601-1081 2. Principal Place of Business 3. Mailing Address c/o John W. Dubbs III Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 222 N. LaSalle St., #300 City & State City & State 4. FEI Number Applied For 36-3817874 Chicago, Illinois Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 60601 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CUADRADO, MANUEL Street Address (P.O. Box Number is Not Acceptable) 200 S. BISCAYNE BLVD., STE 800 **MIAMI FL 33131** Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable, DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE **PSTD** TITLE ☐ Change ☐ Addition ☐ Delete NAME NAME TANK, DEANE H. STREET ADDRESS STREET ADDRESS 340 WEST BARRY CITY-ST-ZIP CITY-ST-ZIP CHICAGO IL 60657 ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE --- Delete TITLE -- [-] Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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 11 or Block 12 if

Deane H. Tank, Pres.

2/21/01

773-929-6909