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9377/0085 90 001 Page 1 of 2
2002-07-24 11:43:31
Cook County Recorder 23.00

Form LP 1108
(Rev. Jan. 1999)

Filing Fee \$15

SUBMIT IN DUPLICATE!

File #

Assigned by
Secretary of State

FILING DEADLINE IS
PRIOR TO

12/01/1998

month day, year

All correspondence regarding this filing will be sent to the registered agent of the limited partnership unless a self-addressed envelope with prepaid postage is included.

JESSE WHITE
SECRETARY OF STATE
STATE OF ILLINOIS

BIENNIAL RENEWAL REPORT
(Illinois or foreign limited partnership)
(Please type or print clearly)



0020810158

LPR307/12/02:01:8380: 40.00 MU
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148-7

DO NOT MAKE CHANGES ON THIS FORM. IF CHANGES ARE NECESSARY, AMENDMENT FORM LP 202 (ILLINOIS) OR LP 905 (FOREIGN) AND THE \$25 FEE IS REQUIRED.

1. Limited partnership's name: Kaiser Loftrium Limited Partnership
2. Address of office where records required by Section 104 (Illinois) or Section 902 (foreign) are kept (P.O. Box alone & c/o are unacceptable): 333 North Michigan Avenue, Suite 1901, Chicago, IL 60601

3. File number assigned by the Secretary of State: S002248

4. Federal Employer Identification Number (F.E.I.N.): 36-3622445

5. Assumed name, if any: _____

6. Admitting name, if any (foreign only): _____

7. Registered agent:

First name Sanford Middle name M. Last name Stein

Registered Office: (P.O. Box alone and c/o are unacceptable)

Number 225 Street West Wacker Drive Suite# 2800

City Chicago County Cook State Illinois ZIP Code 60606

8. State of jurisdiction: Illinois If other than Illinois, attach a Certificate of Good

Standing or Existence not more than 30 days old. Also give formation date BOX 170 in that state.

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2025

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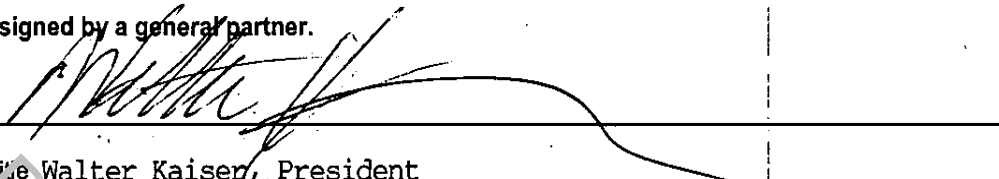
LPR307/12/02:01:8380: 40.00 MU
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I affirm that any entity serving as a general partner for this limited partnership is in good standing in its home state.

The undersigned affirms, under penalties of perjury, that the facts stated herein are true.

Renewal report must be signed by a general partner.

Signature



Type or print name and title Walter Kaiser, President

Name of General Partner if a corporation or other entity Kaiser Loftrium Corp.

(Signature must be in **BLACK INK** on an original document. Carbon copy, photocopy or rubber stamp signatures may only be used on conformed copies.)

RETURN TO:
Secretary of State
Department of Business Services
Limited Partnership Division
Room 357, Howlett Building
Springfield, Illinois 62756
Telephone: (217) 785-8960

BOX 170

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