



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional]

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

LexisNexis Document Solutions  
135 South LaSalle Street  
Suite 2260  
Chicago, IL 60603

8656008-1

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1. DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME		FIRST NAME HAMEED		MIDDLE NAME		SUFFIX	
OR 1b. INDIVIDUAL'S LAST NAME SHEIKH		CITY CALUMET CITY		STATE IL	POSTAL CODE 60409	COUNTRY USA	
1c. MAILING ADDRESS 505 PAXTON AVENUE		1e. TYPE OF ORGANIZATION INDIVIDUAL		1f. JURISDICTION OF ORGANIZATION IL		1g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	
1d. TAX ID # SSN OR EIN 363-44-5631	ADD'NL INFO RE ORGANIZATION DEBTOR						

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME		FIRST NAME		MIDDLE NAME		SUFFIX	
OR 2b. INDIVIDUAL'S LAST NAME		CITY		STATE	POSTAL CODE	COUNTRY	
2c. MAILING ADDRESS		2e. TYPE OF ORGANIZATION		2f. JURISDICTION OF ORGANIZATION		2g. ORGANIZATIONAL ID #, if any <input type="checkbox"/> NONE	
2d. TAX ID # SSN OR EIN	ADD'NL INFO RE ORGANIZATION DEBTOR						

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME U. S. BANK N/K/A MB FINANCIAL BANK, N.A.		FIRST NAME		MIDDLE NAME		SUFFIX	
OR 3b. INDIVIDUAL'S LAST NAME		CITY CHICAGO		STATE IL	POSTAL CODE 60622	COUNTRY USA	
3c. MAILING ADDRESS 1200 N. ASHLAND AVENUE							

4. This FINANCING STATEMENT covers the following collateral:

ALL FIXTURES AND PERSONAL PROPERTY BELONGING TO THE DEBTOR/GRANTOR USED IN CONNECTION WITH THE SUBJECT COLLATERAL PROPERTY AS LISTED BELOW; WHETHER ANY OF THE FOREGOING IS OWNED NOW OR ACQUIRED LATER; ALL ACCESSIONS, ADDITIONS, REPLACEMENTS AND SUBSTITUTIONS RELATING TO ANY OF THE FOREGOING; ALL RECORDS OF ANY KIND RELATING TO ANY OF THE FOREGOING; ALL PROCEEDS RELATING TO ANY OF THE FOREGOING (INCLUDING INSURANCE, GENERAL INTANGIBLES AND ACCOUNTS PROCEEDS).

5. ALTERNATIVE DESIGNATION if applicable:	LESSEE/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILOR	SELLER/BUYER	AG LIEN	NON-UCC FILING
6. <input checked="" type="checkbox"/> This FINANCING STATEMENT is to be filed (for record) (or records) in the REAL ESTATE RECORDS. Attach Addendum if applicable.	7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional]		<input type="checkbox"/> All Debtors		<input type="checkbox"/> Debtor 1	<input type="checkbox"/> Debtor 2
8. OPTIONAL FILER REFERENCE DATA IL-COOK COUNTY		LN/E/REC/SBL/300-ORIGINAL DOC#97U07622 DATE: 06/26/1997				

# UNOFFICIAL COPY

## UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

### 9. NAME OF FIRST DEBTOR (1a or 1b) ON RELATED FINANCING STATEMENT

9a. ORGANIZATION'S NAME

OR  
9b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME, SUFFIX  
SHEIKH HAMEED

10. MISCELLANEOUS: IL-COOK COUNTY  
ADDRESS AS: 505 PAXTON AVENUE, CALUMET CITY, IL 60409  
PIN NO: 29-12-400-043-000

0021041549

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### 11. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one name (11a or 11b) - do not abbreviate or combine names

11a. ORGANIZATION'S NAME

OR  
11b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX  
0021041549

11c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

11d. TAX ID # SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR 11e. TYPE OF ORGANIZATION 11f. JURISDICTION OF ORGANIZATION 11g. ORGANIZATIONAL ID #, if any  NONE

### 12. ADDITIONAL SECURED PARTY'S or ASSIGNOR S/P'S NAME insert only one name (12a or 12b)

12a. ORGANIZATION'S NAME

OR  
12b. INDIVIDUAL'S LAST NAME FIRST NAME MIDDLE NAME SUFFIX

12c. MAILING ADDRESS CITY STATE POSTAL CODE COUNTRY

13. This FINANCING STATEMENT covers  timber to be cut or  as extracted collateral, or is filed as a  fixture filing.

14. Description of real estate:

LOT 17 (EXCEPT THE NORTH 20 'THEREOF), LOT 18 AND THE NORTH 10' OF LOT 19 IN BLOCK 4 IN G. FRANK CROISANT'S SHADOW LAWN, A SUBDIVISION OF THAT PART OF THE WEST 1/2 OF THE SOUTHEAST 1/4 AND THE EAST 1/3 OF THE EAST 1/2 OF THE SOUTHWEST 1/4 OF SECTION 12, TOWNSHIP 36 NORTH, RANGE, 14 EAST OF THE THIRD PRINCIPAL MERIDIAN LYING NORTH OF THE CENTER LINE OF MICHIGAN CITY ROAD, IN COOK COUNTY, ILLINOIS.

15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):

16. Additional collateral description:

17. Check only if applicable and check only one box:

Debtor is a  Trust or  Trustee acting with respect to property held in trust or  Decedent's Estate

18. Check only if applicable and check only one box:

Debtor is a TRANSMITTING UTILITY  
 Filed in connection with a Manufactured-Home Transaction -- effective 30 years  
 Filed in connection with a Public-Finance Transaction -- effective 30 years