

2002-12-11 11:32:42

Cook County Recorder

26.50

## **UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] Fax: (818) 662-4141 Phone:(800) 331-3282 B. SEND ACKNOWLEDGEMENT TO: (Name and Address) 505028 ISUBURBAN 5642955 **UCC Direct Services** P.O. Box 29071 ILIL Glendale, CA 91209-9071

0021366638

	File with: Cook County Recorder, IL		ABOVE SPACE IS FOR FILING OFFICE USE ONLY				
i. DE	BTOR'S EXACT FULL LEGAL NA ME - insert only one debtor name (1	a or 1b) - do not	abbreviate or combine na	mes			
	1a. ORGANIZATION'S NAME						
- 1	1b. INDIVIDUAL'S LAST NAME SHAH	FIRST NAME HARESH		MIDDLE		SUFFIX	
1c M	AILING ADDRESS 38 NORMANDY	MORTON GROVE		STATE	60053	COUNTRY	
1d. T/	AX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION DEBTOR		ON OF ORGANIZATION	ZATION 1g. ORGANIZATIONAL ID #, if any			
	DDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only one of the control of the	del tor name (2a	or 2b) - do not abbreviate	or combine r	names		
OR	SHAH	REN'JEA		MIDDLE NAME		SUFFIX	
	AILING ADDRESS  38 NORMANDY	MORT	ON GROVE	STATE	60053	COUNTRY	
2d. T	AX ID #: SSN OR EIN ADD'L INFO RE ORGANIZATION ORGANIZATION ORGANIZATION ORGANIZATION	2f. JURISDICTION OF URCAN ZATION 2g. ORGANIZATIONAL ID #, if an				NONE	
3. S	ECURED PARTY'S NAME (OF NAME OF TOTAL ASSIGNEE OF ASSIGN  33 ORGANIZATION'S NAME  SUBURBAN BANK & TRUST COMPAN'		only one secured party na	ame (3a or 3i			
OR	3b. INDIVIDUAL'S LAST NAME	FIRST NAME		MIDDLE NAME		SUFFIX	
15	MANING ADDRESS 50 BUTTERFIELD RD	ELMH	JRST	STATE	POLTAL CODE 6/126	COUNTRY	

ALL FIXTURES; WHETHER ANY OF THE FOREGOING IS OWNED NOW OR ACQUIRED LATER; ALL ACCESSIONS, ADDITIONS, ALL FIXTURES; WHETHER ANY OF THE FOREGOING; ALL RECORDS OF ANY KIND RELATING TO ANY OF THE REPLACEMENTS, AND SUBSTITUTIONS RELATING TO ANY OF THE FOREGOING; ALL RECORDS OF ANY KIND RELATING TO ANY OF THE FOREGOING; INCLUDING INSURANCE, GENERAL INTANGIBLES AND ACCOUNTS PROCEEDS. THE NORTH 65.67 FEET OF LOTS 1 AND 2 IN FOREGOING; INCLUDING INSURANCE, GENERAL INTANGIBLES AND ACCOUNTS PROCEEDS. THE NORTHEAST 1/4 OF SECTION 23, TOWNSHIP 42 BLOCK 6 IN MERRILL'S HOME ADDITION TO PALATINE, BEING A SUBDIVISION IN THE NORTHEAST 1/4 OF SECTION 23, TOWNSHIP 42 NORTH, RANGE 10 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, REAL PROPERTY LOCATED AT 427 E, PALATINE BLOCK 6 IN THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, REAL PROPERTY LOCATED AT 427 E, PALATINE BLOCK 6 IN THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, REAL PROPERTY LOCATED AT 427 E, PALATINE BLOCK 6 IN THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, REAL PROPERTY LOCATED AT 427 E, PALATINE BLOCK 6 IN THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, REAL PROPERTY LOCATED AT 427 E, PALATINE BLOCK 6 IN THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, REAL PROPERTY LOCATED AT 427 E, PALATINE BLOCK 6 IN THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, REAL PROPERTY LOCATED AT 427 E, PALATINE BLOCK 6 IN THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS, REAL PROPERTY LOCATED AT 427 E, PALATINE BLOCK 6 IN THE THIRD PRINCIPAL MERIDIAN AND THE TH RD., PALATINE, ILLINOIS 60074. PIN# 02-23-200-022-0000

5. ALTERNATIVE DESIGNATION [if applicable]	SSEE/LESSOR CONSIG		BAILEE/BAILOR	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. This FINANCING STATEMENT is to be filed (for	record] (or recorded) in the REA		JEST SEARCH REPOR	T(S) on Debtor(s)  [optional]	All Debtors	Debtor 1 Debtor 2
8. OPTIONAL FILER REFERENCE DATA	MI abbitest	,				

4. This FINANCING STATEMENT covers the following collateral:

5642955

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	SHAH		HARESH	MIDDLE NAME, SUFFIX					
10.	MISCELLANEOUS								
56	42955-40-1								ì
50	5028 ISUBURBAN								
				7 th 1					
File	e with: Cook County Rec	order, 'L			THE ABOVE S	SPACE IS FO	R FILING OFFICE USE	ONLY	
11	ADDITIONAL DEBTOR'S E	XACT FULL :	ECAL NAME - insert only one	name (11a or 11b) - do no					_
	11a. ORGANIZATION'S NAME				<u></u>				_
OR				FIRST NAME		MIDDLE	SUFFIX		
	11b. INDIVIDUAL'S LAST NAM	Ė	O)r	PIROT NAME					• • • • • • • • • • • • • • • • • • • •
110	. MAILING ADDRESS			CITY		STATE	POSTAL CODE	COUNTRY	
110	OR	D'L INFO RE GANIZATION BTOR	11e. TYPE OF ORGANIZATION	111. JURISDICTION OF O	RGANIZATION	11g. OR	GANIZATIONAL ID #, i	f any	NE
12.	ADDITIONAL SECUR 12a. ORGANIZATION'S NAME		or ASSIGNOR S/P's	NAME - 'nsert only <u>one</u> na	me (12a or 12b)	.,	<u> </u>		_
OR	12b. INDIVIDUAL'S LAST NAM	iÉ		FIRST NAME	×,	MIDDLE	NAME	SUFFIX	_
120	. MAILING ADDRESS			City	C,	STATE	POSTAL CODE	COUNTRY	_
13.	This FINANCING STATEMENT collateral or is filled as a	covers tim	nber to be cut or as-extracted	16. Additional collateral d	lescription:	<b>/</b> /	<u></u>		
14	. Description of real estate:					0,			
D:	escription: 427 E. PAL 0074	ATINE RD	)., PALATINE, ILLINOIS				Diffice.		
4-	Name and address of a BECODE	D OWNER of a	bove-described real estate						
15. Name and address of a RECORD OWNER of above-described real estate (if Debtor does not have a record interest):			17. Check only if applicate Debtor is a Trust or	ole and check <u>only</u> one to		perty held in trust o	r Decedent's Est	ate	
				18. Check only if applicat	ble and check <u>only</u> one b	box.	<u> </u>	<u> </u>	_ '
				Debtor is a TRANSM					/SV 3
				Filed in connection v	with a Manufactured-Hor	ne Transactio	on effective 30 years		10/1