

UNOFFICIAL COPY



UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)  
**BUSINESS BANKING DEPARTMENT EV-**

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

**CHARTER ONE BANK, N.A.  
 1215 SUPERIOR AVENUE  
 CLEVELAND, OHIO  
 44114**

*620x85*

Doc#: 0404849198  
 Eugene "Gene" Moore Fee: \$28.00  
 Cook County Recorder of Deeds  
 Date: 02/17/2004 02:41 PM Pg: 1 of 3

THE ABOVE SPACE IF FOR FILING OFFICE USE ONLY

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

OR

1b INDIVIDUAL'S LAST NAME: **SUWATTHEE** FIRST NAME: **PIYASIT** MIDDLE NAME: SUFFIX:

1c MAILING ADDRESS: **3320 SOUTH NORMAL** CITY: **CHICAGO** STATE: **IL** POSTAL CODE: **60616** COUNTRY: **USA**

1d TAX ID#, SSN OR EIN ADD'NL INFO RE ORGANIZATION DEBTOR 1e. TYPE OF ORGANIZATION 1f. JURISDICTION OF ORGANIZATION 1g. ORGANIZATIONAL I.D.#, if any  NONE

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

OR

2b INDIVIDUAL'S LAST NAME: **ANGTHONG** FIRST NAME: **NARTNAPA** MIDDLE NAME: SUFFIX:

2c MAILING ADDRESS: **3320 SOUTH NORMAL** CITY: **CHICAGO** STATE: **IL** POSTAL CODE: **60616** COUNTRY: **USA**

2d TAX ID#, SSN OR EIN ADD'NL INFO RE ORGANIZATION DEBTOR 2e. TYPE OF ORGANIZATION 2f. JURISDICTION OF ORGANIZATION 2g. ORGANIZATIONAL I.D.#, if any  NONE

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: **CHARTER ONE BANK, N.A.**

OR

3b INDIVIDUAL'S LAST NAME: FIRST NAME: MIDDLE NAME: SUFFIX:

3c MAILING ADDRESS: **1215 SUPERIOR AVENUE** CITY: **CLEVELAND** STATE: **OH** POSTAL CODE: **44114** COUNTRY: **USA**

4. This FINANCING STATEMENT covers the following collateral:

All personal property of the Debtor respecting that certain parcel of land and the structures and improvements now or hereafter thereon located, as more particularly described in Exhibit A attached hereto (the "Property"), together with: (i) all rights now or hereafter existing, belonging or pertaining thereto; (ii) all goods, furniture, machinery, equipment, fixtures, accounts, contract rights, documents, instruments, proceeds of insurance, general intangibles and other items of personal property of the Debtor or in which it has an interest, now owned or hereafter acquired, that are located on or used in connection with the Property and any substitutions, replacements, accessions and proceeds of any of the foregoing; (iii) all judgments, awards of damages and settlements hereafter made as a result or in lieu of any taking respecting the Property; (iv) all of the rights and benefits of Debtor under any present or future leases and agreements relating to the Property, or the use or occupancy thereof together with any extensions and renewals thereof; and (v) all contracts, permits and licenses respecting the use, operation or maintenance of the Property.

Property Address: 2727 South Poplar Avenue, Chicago, Illinois 60608

5. ALTERNATIVE DESIGNATION (if applicable):  LESSEE/LESSOR  CONSIGNEE/CONSIGNOR  BAILEE/BAILOR  SELLER/BUYER  AG. LIEN  NON-UCC FILING

6.  This FINANCING STATEMENT is to be file (for record) (or recorded) in the REAL ESTATE RECORDS. Attach Addendum (if applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) (ADDITIONAL FEE) (optional)  All Debtors  Debtor 1  Debtor 2

8. OPTIONAL FILER REFERENCE DATA

TO BE FILED WITH: ILLINOIS SECRETARY OF STATE / COOK COUNTY RECORDER

# 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

**SUWATTHEE**

**PIYASIT**

10. MISCELLANEOUS:

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

### 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

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 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:

**SEE EXHIBIT A**

16. Additional collateral description:

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 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

# UNOFFICIAL COPY

## EXHIBIT "A"

### Property Description

LOTS 18, 19, 20 AND 21 (EXCEPT THE NORTHWESTERLY 50 FEET) IN HOEY'S SUBDIVISION OF LOTS 4 AND 5 IN BLOCK 24 IN CANAL TRUSTEE'S SUBDIVISION OF THE SOUTH FRACTIONAL OF SECTION 29, TOWNSHIP 39 NORTH, RANGE 14 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS

Property of Cook County Clerk's Office