

# UNOFFICIAL COPY



Doc#: 0504748206  
Eugene "Gene" Moore Fee: \$26.50  
Cook County Recorder of Deeds  
Date: 02/16/2005 03:10 PM Pg: 1 of 2

## UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER [optional] <b>UCC COORDINATOR (813) 881-1988 *230</b>
B. SEND ACKNOWLEDGMENT TO: (Name and Address)  <b>I.S.P.C. 6420 BENJAMIN ROAD TAMPA, FLORIDA 33634-5119</b>

THE ABOVE SPACE IS 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 <b>FLORES</b>		FIRST NAME <b>MARIVEL</b>	MIDDLE NAME	SUFFIX	
1c. MAILING ADDRESS <b>1777 HOLLYWOOD AVE</b>			CITY <b>HANOVER PARK</b>	STATE <b>IL</b>	POSTAL CODE <b>601333332</b>	COUNTRY <b>US</b>
1d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	1e. TYPE OF ORGANIZATION	1f. JURISDICTION OF ORGANIZATION		1g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> 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 <b>FLORES</b>		FIRST NAME <b>ROBERTO</b>	MIDDLE NAME	SUFFIX	
2c. MAILING ADDRESS <b>SAME AS ABOVE</b>			CITY	STATE	POSTAL CODE	COUNTRY <b>US</b>
2d. TAX ID #: SSN OR EIN	ADD'L INFO RE ORGANIZATION DEBTOR	2e. TYPE OF ORGANIZATION	2f. JURISDICTION OF ORGANIZATION		2g. ORGANIZATIONAL ID #, if any <input checked="" type="checkbox"/> 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 <b>I.S.P.C.</b>						
OR	3b. INDIVIDUAL'S LAST NAME		FIRST NAME	MIDDLE NAME	SUFFIX	
3c. MAILING ADDRESS <b>6420 BENJAMIN ROAD</b>			CITY <b>TAMPA</b>	STATE <b>FL</b>	POSTAL CODE <b>33634-5112</b>	COUNTRY <b>US</b>

4. This FINANCING STATEMENT covers the following collateral:

**SteelTec Water Conditioning System**

*Manly  
2 Pgs  
H*

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 filed [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

**COOK, IL I.S.P.C. FILE # 570067**

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## UCC FINANCING STATEMENT ADDENDUM

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

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

9a. ORGANIZATION NAME

OR

9b. INDIVIDUAL'S LAST NAME

**FLORES**

FIRST NAME

**MARIVEL**

MIDDLE NAME, SUFFIX

**10. MISCELLANEOUS:**

**COOK, IL**

**ISPC FILE # 570067**

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FILING OFFICE COPY – UCC FINANCING STATEMENT (FORM UCC1)(REV. 05-22-02)

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

11a. ORGANIZATION'S NAME

OR

11b. INDIVIDUAL'S LAST NAME

**FLORES**

FIRST NAME

**ROBERTO**

MIDDLE NAME

SUFFIX

**11c. MAILING ADDRESS**

**1777 HOLLYWOOD AVE**

CITY

**HANOVER PARK**

STATE

**IL**

POSTAL CODE

**60133333**

COUNTRY

**US**

**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 debtor name (12a or 12b)**

12a. ORGANIZATION'S NAME

**I.S.P.C.**

OR

12b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

**12c. MAILING ADDRESS**

**6420 BENJAMIN ROAD**

CITY

**TAMPA**

STATE

**FL**

POSTAL CODE

**33634**

COUNTRY

**US**

**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:**

PARCEL ID. 06 25 410 0000, SEC 25, TWP 41,  
RGE 09, LOT 73, HANOVERG # 2 AS  
DESCRIBED IN DOC # 0010495202  
ACCORDING TO THE RECORDS OF COOK  
COUNTY, ILLINOIS

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

**MARIVEL FLORES  
ROBERTO FLORES  
1777 HOLLYWOOD AVE  
HANOVER PARK, IL 601333332**

**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  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