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FILING DEADLINE IS: PRIOR TO 12/01/88

RETURN TO:

Corporation Department Secretary of State Springfield, IL. 62756 Telephone (217) 782-7808

STATE OF ILLINOIS **DOMESTIC CORPORATION ANNUAL REPORT**

CORPORATION FILE NO. D 4375-747-4

YEAR OF 1988

			2 - 4				
	207 BUILDI	NG CORPO	RATION				
1.)	% Utalii i	**************************************	Mireh J Vo	gt 3rd. 96	0778		
CORPORATE NAME	1135 W ADA	MS		-		COOK	
REGISTERED AGENT	CHICAGO, I	L. 60607	7-2903				
REGISTERED OFFICE							
CITY, IL. ZIP CODE		~ ~	٠ ١	-AGENT/OF	FICE CHANGE	S ONLY (can)	163
95		H,]	$\mathbf{L} \mathbf{E}'$	D 227	FICE CHANGE		1119
	5	_		2(17	COLDOS C	<u> </u>	<u>N_</u>
	11067			III nob			
3.) Date Incorporated 12/30) 1 1988	3 Tricen	J Vogt 3rd	gent	
Give complete address of principal of	tice to alner than above	8 :					
	0,5		, ಮುಂಗಿನ		Registered Office · S	treet Address	
		Lasid	itary of Sicio	•			
Federal Employer Identification Number (FEIN) * 362546696	er		•		City, County, IL	Zip Code	
		90	416 - 4	#1		4 1	_
4.) The names and addresse							Ŏ
NAME		NUMBER & ST	HEET	CITY	STATE	ZIP	
Dolores V Suess	President	1135 W 44	ms St.	Chicago,	Illinois	60607	<u></u>
Ulreh J Vogt 3rd.	Secretary	1135 W Ad.		II .	It	60607	
Ulreh J Vogt 3rd.	Treasurer	1135 W Ada	ans st.	ıı:	11	60607	تــــ
Dolores V Suess	Director	1135 W Ad:	ma St				_}
Ulreh J Vost 3rd.	Director	1135 W Ada	ms St	<u>n.</u>			_ T ,
	Director						
5.) The type of business act	ually conducted	l in Illinois is:	Real Est	ate - Renti	ng.		
6.) Number of shares author	ized and issued	(as of g/3n	188)		O.		
CLASS SERIES	PAR V.			R AUTHORI (E	D*	NUMBER ISSUI	ED
NCN-PAR-ST	·			100	3)	100	
							
			-,, -, -, -, -, -, -, -, -, -, -, 				
				······································			_
,			75) The De	taki da ara		0	
7a.) The amount of paid-in c	•	9/30/88	70.) The Pa	iid-in Capital ord with the	as of no/30 Secretary of S	789 T	
	is:		OII 160	טיט אוווו נוופ טיט	•		
PAID-IN CAPITAL \$ 3			TOTAL	. \$	30	000	
"'Paid-in Capital" replac	es the terms		(The fi	gure in It <mark>em</mark>	7b may not be	e altered.)	
Stated Capital and Paid	in Surplus.		-		-	•	

¥	Delones ?	M 8	MUST	T BE	SIGNED
A L Ru	X diones (Lucs	- Samo	11 /02 /00	Under the penalty of

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It does not include Retained Earnings.

(Any Authorized Officer's Signature)

f perjuty and as an authorized officer, I declare that this annual report and, if applicable, the statement of change of registered agent and/or office, pursuant to provisions of the Business Corporation Act. ledge and belief, true, correct, and complete

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Vogts line Sty 1100 W. ADAMS CHy0 16 60607



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