

UNOFFICIAL COPY

3 0 3 0 8 9 0 5

PLEASE TYPE OR PRINT CLEARLY IN BLACK INK

FILING DEADLINE IS: 88308915
3/1/88

RETURN TO:

STATE OF ILLINOIS

CORPORATION
FILE NO.

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

FILED

DOMESTIC CORPORATION ANNUAL REPORT

85232-627-3

MAY 26 1988

YEAR OF 1988

JIM EDGAR

1.) Secretary of State

CORPORATE NAME
REGISTERED AGENT
REGISTERED OFFICE
CITY, IL, ZIP CODE

SAM'S PLACE LTD

1863 W. CENTRAL RD
ARLINGTON HTS, IL 60005

2.) AGENT/OFFICE CHANGES ONLY (see 1110)

SAM'S PLACE LTD
Corporation Name
SAM'S OF ARLINGTON HTS
Registered Agent
1863 W. CENTRAL RD.
Registered Office - Street Address
ARLINGTON HTS, IL 60005
City, County, IL Zip Code

3.) Date Incorporated

Give complete address of principal office, if other than above:

3/13/81

Federal Employer Identification Number
(FEIN)

36-3120161

4.) The names and addresses of the officers and directors are: (If officers are directors, so state.)

NAME	OFFICE	NUMBER & STREET	CITY	STATE	ZIP
SAM TRAKKA	President	515 N. GULLIE	MT. PROSPECT	IL	60056
WOLFE TRAKKA	Secretary				
	Treasurer				
	Director				
	Director				
	Director				

5.) The type of business actually conducted in Illinois is:

6.) Number of shares authorized and issued (as of)

CLASS	SERIES	PAR VALUE	NUMBER AUTHORIZED	NUMBER ISSUED

7a.) The amount of paid-in capital as of is:

*PAID-IN CAPITAL \$ 1000-

*"Paid-in Capital" replaces the terms Stated Capital and Paid-in Surplus. It does not include Retained Earnings.

7b.) The Paid-in Capital as of on record with the Secretary of State is:

TOTAL \$ 1000-

(The figure in Item 7b may not be altered.)

ITEM 8 MUST BE SIGNED

8.) By

Sam Trakka
(Signature)
Pres. or V. Pres. (required if changes listed in 2)

SECRET
(Title)
5/7/88
(Date)

Under the penalty of perjury 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, has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete.

Attest

(Secretary's or ass't. Secretary's Signature required only if changes listed in 2)

(Title) (Date)

UNOFFICIAL COPY

SAM'S PLACE LT

1063 W. CENTRAL
Arlington Hts, IL, 60005



Property of Cook County Clerk's Office

DEPT-91 RECORDING \$12.25
T#1111 TRAN 9692 07/13/88 16:02:00
#3579 # A *-88-308905
COOK COUNTY RECORDER

88308905

88308905

88308905