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L.L.C. File Number: 0005 718

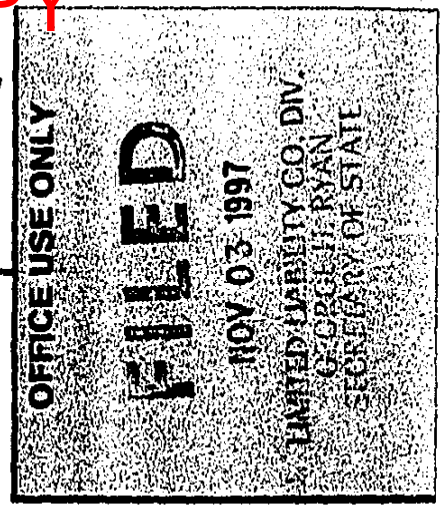
George H. Ryan
Secretary of State - State of Illinois
Domestic Limited Liability Company
Annual Report

Filing Deadline is Prior to: 12/01/1997

This report must be RECEIVED in the office of the Secretary of State prior to the anniversary date to avoid late filing penalties and eventual administrative dissolution of its organization.

Form **LLC-50.1(D)** January 1994

Filing Fee \$300
Submit in Duplicate
Must be typewritten



1. Limited Liability Company name: Registered Agent, Registered Office, City, IL., ZIP Code

CLARK STREET L.L.C.
MITCHELL SAYWITZ
35 W. WACKER DRIVE SUITE 3240
CHICAGO IL, 60601-0000
OCT 27 1997

2. CHANGES ONLY: REGISTERED AGENT

REGISTERED OFFICE 333 Skokie Blvd., Ste. 101
CITY, IL., ZIP CODE, COUNTY Northbrook, IL 60062 Cook Recorder 23.50
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3. Federal Employer Identification Number: 36-3990698

4. Address of the office at which the records required by Section 1-40 are to be kept is:

333 Skokie Blvd Ste 101
Number Street Suite
Northbrook IL 60062
City, State ZIP Code County

5. Names and addresses of the managers or, if none, the members:

Name	Number & Street	City, State	ZIP Code	Select MGR/MBR
Mitchell Saywitz	35 W. Wacker Drive, Suite 3249,	Chicago, IL	60601	Mgr/Mbr
Ann Saywitz	2822 Windsor Drive #207,	Lisle, IL	60532	Mbr
Karen Saywitz	1302 Holmby Avenue,	Los Angeles, CA	90024	Mbr
Janet Saywitz	2481 NE Coachman Rd	Clearwater FL	34625	Mbr
Allan Saywitz	2721 Cripple Creek Ct	Naperville IL	60564	Mbr

6. The undersigned affirms, under penalties of perjury, having authority to sign thereto, that this annual report is to the best of my knowledge and belief, true, correct and complete.

Payment may be made by business firm check payable to Secretary of State. (If check is returned for any reason this filing will be nullified)

Return to:
Department of Business Services
Limited Liability Company Division
Room 359, Howlett Building
Springfield, IL 62756

Dated October 28, 19 97

Mitchell Saywitz
(Signature)
Mitchell Saywitz, Manager
(Type or print Name and Title)

(If applicant is a company or other entity, state name of company and indicate whether it is a member or manager of the LLC.)

5-1
P-1
N-1
M-1
D-1

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