## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 28 1997 8:00am

Secretary of State

2/44/97 630 9246700

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

SIGNATURE:

DOCUMENT # F95000002053 (5)

COMARK CORPORATE SALES, INC.

Principal Place	<b>,</b>	444	Mailing Address 444 SCOTT DRIVE							
BLOOMINGDALE IL 60108 US			BLOOMINGDALE IL 60108-3111 US				3. Date Incorporated or Qualified			
2. Principal Pi	iace of Business	} <b>-</b>	Mailing Address				4. FEI Number	,	A	Applied For
State, Apt	# rete	26	Suite, Apt. #, etc.				36-3948996			Not Applicable Additional
22	H. (10)	27	Colle, Apr. II, Cio.				5. Certificate of Status Desired			Required
City & State	6	28	City & State				Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Ζιρ 24	Country 25	29	Zip	30	untry	ý	This corporation has liability for in Florida Statutes	ntangible ] Yes 米		s. 199.032.
	9. Name and Address of Curre		ered Agent				10. Name and Address of New Re	gistered #	gent	
	PRENTICE-HALL CORPORATIO	n syst	EM, INC.		81	Name				
	HAYS ST.				82	Street Add	fress (P.O. Box Number is Not Acceptab	le)	********	
IALL	LAHASSEE FL 32301				83	<u></u>	.,			***************************************
						-			T 1 1	0
					84	City		FL	<b>85</b> Zip	Code
SIGNATURE	Signatura, typ., dier pentestraan eierfregiscoest ag OFFICERS AN	gent and tale	fapplicable (NO				ition's board of directors. I hereby acception in the second of directors of the second of the secon	DATE		
Talaf	PD	NO DINCE	DELETE	1.1 7	ITLE		ADDITIONS/OFFAINALS TO OFFIC	ENS AND	Change	
MAME	WOLANDE, CHARLES S			1.2 Å		ĺ				
STREET ADDRESS.	444 SCOTTT DIRVE			138	TREET	T ADDRESS				
CHTY - ST - 74P	BLOOMINGDALE IL					ST-ZIP			r 1 o	
THEE NAME	DC COCORAN, PHILIP E		☐ DELETE	21T 22N		- }			[] Change	Addition
STREET ADDRESS	444 SCOTT DRIVE			1		T ADDRESS				
Offy-ST-ZiE	BLOOMINGDALE IL					ST-ZIP				
DRF	8	•	DELETE	3,11	ITLE				Change	Addition
NAME SAMELL AMOUNTS	COCORAN, VICTORIA 444 SCOTT DRIVE			3.2 N		T ADDRESS				
STREET ADDSESS CITY ST-7IP	BLOOMINGDALE IL					ST-ZIP				
TIFLE	VST		☐ DELETE	4.1 1		<del></del>			Change	Addition
NAME	KEILMAN, DAVID			4. 21	NAME					
STREET ADDRESS	444 SCOTT DRIVE BLOOMINGDALE IL			- 1		T ADDRESS				
CITY-\$1-7-2 THE	DECOMINODALE IL		DELETE	51 T		ST-ZIP		<del></del>	Change	☐ Addition
NAME				5.2 N					3-	
SPREET ADDRESS				5.3 9	TREET	T ADDRESS				
CATY ST ZIF			Driete			\$1-ZIP		<del></del>	Chance	Auditi
TOLE			DELETE	6.1 T	ITLE IAME				L Change	Addition
NAME STREET ADDRESS						T ADDRESS				
City+St+7IP						ST-ZIP				
informatio	ir, inclic studies this conjust topout or	supplement the reci	ontal annual report is	true and	acc	urate and the	rd in Section 119.07(3)(i), Florida Statute at my signature shall have the same lega ort as required by Chapter 607, Florida S	affect as	if made u	inder nath: tha

AME OF SIGNING OFFICER OR DIRECTOR