


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

**FILED**

**Jan 23 1998 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F95000004181 (2)**

1. Corporation Name  
**TT TECHNOLOGIES, INC.**



Principal Place of Business 2020 E NEW YORK AURORA IL 60504 US	Mailing Address 202 E NEW YORK AURORA IL 60504 US
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**08/29/1995**

21	2. Principal Place of Business	26	2a. Mailing Address
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	28	City & State
24	Zip	29	Country
25	Country	30	Country

4. FEI Number  
**36-3755870**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent

**BRAHLER, C. J. JR**  
**3701 NE 36TH AVE., STE C**  
**OCALA FL 34479**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Gena K. Brahler* DATE: 1/12/98

Signature, typed, printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	DC	<input type="checkbox"/> DELETE
NAME	SCHMIDT, CAROLA	
STREET ADDRESS	2020 E NEW YORK ST	
CITY-ST-ZIP	AURORA IL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	BRAHLER, C. J. JR	
STREET ADDRESS	2020 E NEW YORK ST	
CITY-ST-ZIP	AURORA IL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HOLCOMB, DAVID	
STREET ADDRESS	2020 E NEW YORK ST	
CITY-ST-ZIP	AURORA IL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	BRAHLER, GENA	
STREET ADDRESS	2020 E NEW YORK	
CITY-ST-ZIP	AURORA IL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	SCHMIDT, MARC	
STREET ADDRESS	2020 E NEW YORK	
CITY-ST-ZIP	AURORA IL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Gena K. Brahler* **REQUIRED** DATE: 1/12/98 6030/857 8200

CR2E034 (10/97)