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		-	i late e e e	••
			LAAE OND FILED FOR A	
IFORMATION REQUEST	•		FILED FOR A	ÉCUR.
OLLOW INSTRUCTIONS (front and back) CA	FILING OF ECEA OCT #	^		
DNAME & PHONE OF CONTACT [optional] Amy 365-4082 or Karen	366.4844	0.00030	2005 FEB - 3 F	M 3:21
DRETURN TO: (Name and Address)	202 1861	_		
		_	MICHAEL A RI RIOS e d	ROWN
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The Paper	Chase of			
Northwest In				
9505 Genev	rleve D rive			
St. John, II	N 46373			
L_				1105 ON V
DEBTOR NAME to be searched - insert only	one debtor name (1a or 1h) - do not abbreid		CE IS FOR FILING OFFICE	USE ONLY
1+COPCANIZATION'S NAME			_	
Magnatech	Integrated Se	ervices Lorp		
16/INDIVIDUAL'S LAST NAME	FIRST NAM	NE .	MIDDLE NAME	SUFFIX
INFORMATION OPTIONS relating to UC	_	e filing office that include as a Det	btor name the name identifie	d in item 1:
2a DSEARCH RESPONSE CERTIFIED	<u> </u>			
Select one of the following two options:	ALL (Check this box to request a	a response that is complete, inclu	iding filings that have lapsed	UNLAPSE
2b COPY REQUEST CERTIFIED Select one of the following two options:	Optional) ALL UNLAPSED			
			•	
2cD SPECIFIED COPIES ONLY	CERTIFIED (Optional)			
		Type of Record and Addition	nal identifying information	(if required)
Record Number	Date Record Filed (if required)	Type of Record and Addition	nal identifying information	a (if required)
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Record Number		Nothing		(if required)
Record Number		Thru date		i (if required)
Record Number	Date Record Filed (if required)	Thru date	: 2/0/05	(if required)
Record Number	Date Record Filed (if required)	Thru date	: 2/0/05	a (if required)
Record Number JADDITIONAL SERVICES: DELIVERY INSTRUCTIONS (request will be considered) Pick Up 4a0 Pick Up 4b0 Other	Date Record Filed (if required)	Thru date	: 2/d (05	