

2005 000292

| 13. SECURED PARTY'S NAME ORGANIZATION   2a Type of Organization   2a Type of Organization   2a Type of Organization   2a Type of Organization   2a Organizat | A. NAME & PHONE OF                           | ONS (front and back) F CONTACT AT FILE     |  |   |                                     |                           |                               |
|--|--|--|--|---|-------------------------------------|---------------------------|-------------------------------|
| SACTAMENT CA 95833  ***LENANTE LOCATIONS DATE OF THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY  1.DESTOR'S EXACT FULL LEGAL NAME - inventionly goal debtor name (1sor 1b) - do not abbreviate or combine names  1. GORGANIZATIONS INAME  1. GORGANIZATION INAME  1. GORGANIZATION INAME  1. SERIESTELUCIONS  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2s) - do not abbreviate or combine names  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2s) - do not abbreviate or combine names  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2s) - do not abbreviate or combine names  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2s) - do not abbreviate or combine names  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2s) - do not abbreviate or combine names  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2s) - do not abbreviate or combine names  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2s) - do not abbreviate or combine names  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2sor - do not abbreviate or combine names  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2sor - do not abbreviate or combine names  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2sor - do not abbreviate or combine names  2. ADDITIONAL DESTORS EXACT FULL LEGAL NAME - insent only goal debtor name (2sor 2sor - do not abbreviate or combine names  3. SECURED PARTY SAME (proposed parts abbreviate or combine names  3. SECURED PARTY SAME (proposed parts abbreviate or combine names  3. ADDITIONAL DESTORS ADDITIONAL PARTY POSTAL CODE  3. MALERA DATE RECORDED AND ADDITIONAL PARTY POSTAL  | B. SEND ACKNOWLE                             | DGMENT TO: (Nam                            | ne and Address)                        | BWE For BWE   |                                     |                           |                               |
| 1. DEBTOR'S EXACT FULL LEGAL NAME insert only gag delitor name (1 so 11b) - do not abbreviate or combine names    1a ORGANIZATION SHAWE  | Suite 10<br>2730 Gat                         | 0<br>eway Oaks Dr<br>to, CA 95833          | rive                                   |   |                                     |                           |                               |
| Table Proportion   Trust       | 3 4<br>Dec 00                                | 0 5 0 =                                    | 5 8 <del>-</del> L                     | ′ ′ ′ ′   | E ABOVE SPACE IS FOR                | FILING OFFICE U           | SE ONLY                       |
| The HODVIDUAL SLASTNAME  |  |  | insert only <u>one</u> debtor na       | ame (1a or 1b) - do not abbreviate or combine names                             |                                     |                           |                               |
| 19 SEEINSTRUCTIONS   ADDILINFORE   1e TYPE OF ORGANIZATION   11 JUNISDICTION OF ORGANIZATION   19 ORGA |  |  |  | FIRST NAME  | MIDDLE NA                           | ME                        | SUFFIX                        |
| In Serinstructions   | 1c. MAILING ADDRESS                          |  |  | CITY  | STATE   F                           | OSTAL CODE                | COUNTRY                       |
| DEBTOR   CORP   IN   | 13226 Wicker                                 |  |  | Cedar Lake  | IN                                  | 46303                     | USA                           |
| 2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - insert only gase debtor name (2a or 2b) - do not abbreviate or combine names  2a ORGANIZATION'S NAME    FIRST NAME  | ORGANIZATION CORP                            |  |  | 11. JURISDICTION OF ORGANIZAT   | TION 1g. ORGAN                      | IZATIONAL ID #, if an     | у                             |
| Tab INDIVIDUAL'S LAST NAME   |  |  |  |   |                                     |                           |                               |
| 2c. MAILING ADDRESS  CITY  STATE POSTAL CODE COUNTR  2d SEEINSTRUCTIONS  ADD'L NFO RE ORGANIZATION DEBTOR  ORGANIZATION DEBTOR  3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only page secured party name (3a or 3b)  3a. ORGANIZATIONS NAME Standard Bank & Trust Company  OR 3b. INDIVIDUAL'S LAST NAME  TRUST COMPANY  THOU POSTAL CODE  STATE POSTAL CODE  COUNTR  ORGANIZATION SIND  STATE POSTAL CODE  COUNTR  STATE POSTAL CODE  COUNTR  STATE POSTAL CODE  COUNTR  THOU POSTAL CODE  COUNTR  ALI Inventory, Chattel Paper, Accounts, Equipment, Documents and General intangibles; whether a of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds).  S. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG, LIEN NON-LUCC    E. This FINANCING STATEMENT is to be filed for record [or recorded] in the REAL   7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) All Debtor. Debtor 1 December 1   December 2   December 3   Debtor 3   Debtor 4   December 3   December 3   Debtor 4   December 3   December 4   December 3   December 4   December 4   December 4   December 4   December 5   December 5   December 5   December 6   December 7   December  |  |  | LEGAL NAME - inse                      | ert only <u>one</u> debtor name (2a or 2b) - do not abbrevia                    | iate or combine names               |                           |                               |
| 26. MAILING ADDRESS  CITY  STATE  POSTAL CODE  COUNTR  27. ORGANIZATION  DOGGANIZATION  DOGGANIZ |  |  |  |   |                                     |                           |                               |
| 2d SEEINSTRUCTIONS   ADDILINFO RE   2e TYPE OF ORGANIZATION   2t JURISDICTION OF ORGANIZATION   2g ORGANIZATIONAL ID #, # any ORGANIZATION   DEBTOR   2a ORGANIZATION   DEBTOR   2a ORGANIZATION   DEBTOR   DEBTOR | 2b. INDIVIDUAL'S LA                          | ST NAME                                    |  | FIRST NAME  | MIDDLE NA                           | ME                        | SUFFIX                        |
| ORGANIZATION   DEBTOR    3. SECURED PARTY'S NAME (orNAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only gng secured partyname (3a or 3b)  3a. ORGANIZATIONS NAME   Standard Bank & Trust Company    3b. INDIVIDUAL'S LAST NAME   Standard Bank & Trust Company    3c. MAILING ADDRESS   TRY   This FINANCING STATEMENT covers the following collateral:  All Inventory, Chattel Paper, Accounts, Equipment, Documents and General intangibles; whether a substitutions relating to any of the foregoing; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all proceeds relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds).  5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR   CONSIGNEE/CONSIGNOR   BAILEE/BAILOR   SELLER/BUYER   AG. LIEN   NON-UCCF    6. KITHIS FINANCING STATEMENT is to be filed [for recorded) in the REAL   (ADDITIONAL FEE)   ALTERNATIVE DESIGNATION [if applicable]   Debtors   Debto | 2c. MAILING ADDRESS                          |  |  | CITY  | STATE F                             | OSTAL CODE                | COUNTRY                       |
| SECURED PARTY'S NAME (or NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - insert only one secured party name (3a or 3b)   3a ORGANIZATIONS NAME  | 2d. SEE INSTRUCTIONS                         |  | 2e. TYPE OF ORGAN                      | 21. JURISDICTION OF ORGANIZATION  | TION 2g. ORGAN                      | IZATIONAL ID #, if an     | ny                            |
| Standard Bank & Trust Company  OR Standard Bank & Trust Company  OR Standard Bank & Trust Company  Standard Bank & Trust Company  Standard Bank & Trust Company  OR Jab INDIVIDUAL'SLAST NAME   FIRST NAME   MIDDLE NAME   SUFFIX  STATE   POSTAL CODE   COUNTR  TIL   60457   USA  4. This FINANCING STATEMENT covers the following collateral:  All Inventory, Chattel Paper, Accounts, Equipment, Documents and General intangibles; whether of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds).  5. ALTERNATIVE DESIGNATION [if applicable]   LESSEE/LESSOR   CONSIGNEE/CONSIGNOR   BAILEE/BAILOR   SELLER/BUYER   AG LIEN   NON-LUCCE    This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL   7. Check to RECUEST SEARCH REPORT(S) on Debtor(s)   All Debtors   Debtor 1   Deficition   Debtor 1   Deficition   Debtor 1   Deficition   Debtor 2   Debtor 1   Deficition   Debtor 3   Debtor 4   Debtor 3   Debtor 4   Debtor 4   Debtor 4   Debtor 5   Debtor 1   Description   Debtor 4   Debtor 5   Debtor 4   Debtor 5   Debtor 6   |  |  |  |   |                                     |                           | МОИ                           |
| Standard Bank & Trust Company    Standard Bank & Trust Company   |  |  | TOTAL ASSIGNEE of A                    | SSIGNOR S/P) - insert only one secured party name (                             | (3a or 3b)                          |                           |                               |
| 38. MAILING ADDRESS  38. MAILING ADDRESS  38. MAILING ADDRESS  38. MAILING ADDRESS  4. This FINANCING STATEMENT covers the following collateral:  All Inventory, Chattel Paper, Accounts, Equipment, Documents and General intangibles; whether of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds).  5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR CONSIGNEE/CONSIGNOR BAILEE/BAILOR SELLER/BUYER AG LIEN NON-LUCCE STATE MEANING STATEMENT is to be filed [for record] for recorded) in the REAL This FINANCING STATEMENT is to be filed [for record] for recorded) in the REAL TRANSCING STATEMENT is to be filed [for record] for precorded in the REAL TRANSCING STATEMENT is to be filed [for record] for recorded in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSCING STATEMENT is to be filed [for recorded] in the REAL TRANSC |  |  | Company                                |   |                                     |                           |                               |
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| 4. This FINANCING STATEMENT covers the following collateral:  All Inventory, Chattel Paper, Accounts, Equipment, Documents and General intangibles; whether a of the foregoing is owned now or acquired later; all accessions, additions, replacements, and substitutions relating to any of the foregoing; all records of any kind relating to any of the foregoing; all proceeds relating to any of the foregoing (including insurance, general intangibles and other accounts proceeds).  5. ALTERNATIVE DESIGNATION [if applicable]: LESSEE/LESSOR   CONSIGNEE/CONSIGNOR   BAILEE/BAILOR   SELLER/BUYER   AG. LIEN   NON-UCCF    6.   This FINANCING STATEMENT is to be filed [for record] (or recorded) in the REAL   7. Check to REQUEST SEARCH REPORT(S) on Debtor(S)   | 3c MAILING ADDRESS                           |  |  | CITY  | STATE                               | POSTAL CODE               | COLINTRY                      |
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| 6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL iff applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [All Debtors Debtor 1 Destroy 1 Debtor 2 Debtor 3 Debtor 3 Debtor 4 Destroy 2 Debtor 4 Destroy 2 Debtor 4 Destroy 2 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 8 Debtor 8 Debtor 8 Debtor 8 Debtor 8 Debtor 8 Debtor 9  | of the foreg<br>substitution<br>foregoing; a | going is owners relating tall proceeds     | ed now or actor any of the relating to | equired later; all accessine foregoing; all records of any of the foregoing (in | ons, additions,<br>of any kind rela | replacemen<br>ating to an | nts, and<br>my of the         |
| 6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL [ff applicable] 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [optional] All Debtors Debtor 1 Description of the REAL [optional] Debtor 1 Description of the REAL [optional] All Debtors Debtor 1 Debtor 1 Description of the REAL [optional] Debtor 1 Debtor 1 Description of the REAL [optional] Debtor 1 Debt |  |  |  |   |                                     |                           |                               |
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| 6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL   7. Check to REQUEST SEARCH REPORT(S) on Debtor(s)   All Debtors   Debtor 1   Destruction   Debtor 2   Debtor 3   Debtor 4   Destruction   Debtor 4   Destruction   Debtor 5   Debtor 6   Debtor 6   Debtor 7   Debtor 8   Debtor 8   Debtor 8   Debtor 9   Debtor |  |  |  |   |                                     |                           |                               |
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| 6. This FINANCING STATEMENT is to be filed (for record) (or recorded) in the REAL iff applicable) 7. Check to REQUEST SEARCH REPORT(S) on Debtor(s) [All Debtors Debtor 1 Description of the REAL in All Debtors Debtor 1 Description of the REAL in All Debtors Debtor 1 Description of the REAL in All Debtors Debtor 1 Debtor 1 Description of the REAL in All Debtors Debtor 1 Debtor 2 Debtor 1 Debtor 3 Debtor 1 Debtor 1 Debtor 3 D |  |  |  |   |                                     |                           |                               |
| 8. OPTIONAL FILER REFERENCE DATA  200 000 - 1 Vande  | 5. ALTERNATIVE DESIGN                        | VATION lif applicable)                     | LESSEE/I ESSOP                         | CONSIGNEF/CONSIGNOR RAIL EE/  | /BAILOR SELLER/PLIVE                | ER AG LIEN                | NON-LICC EILIN                |
| IN-Lake County Recorder  |  |  |  |   |                                     |                           |                               |
|  | 6. This FINANCING ST<br>ESTATE RECORDS       | TATEMENT is to be filed<br>Attach Addendum |  |   |                                     |                           | NON-UCC FILIN Debtor 1 Debtor |

| LLOW INSTRUCTIONS (front a   | ING BACK/ CAREL OLL I                      |  |  |                 |
|--|--|--|--|-----------------|
|  | a or 1b) ON RELATED FINANCING STA          | TEMENT   |  |                 |
| 9a. ORGANIZATION'S NAME  |  |  |  |                 |
| Jimanna Inc  |  |  |  |                 |
| 9b. INDIVIDUAL'S LAST NAME   | FIRST NAME                                 | MIDDLE NAME, SUFFIX  |  |                 |
| MISCELLANEOUS: IN-Lake   | e County Recorder                          |  |  |                 |
|  |  |  |  |                 |
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|  |  | THE  | BOVE SPACE IS FOR FILING OFFIC                     | ELISE ONLY      |
| ADDITIONAL DEBTOR'S EX   | ACT FULL LEGAL NAME - insert only one r    |  |  | E 03E ONLT      |
| 11a, ORGANIZATION'S NAME   | NOT TOLE LEGAL HAVE - Insert only one i    | ialle (112 of 113) - de llot abbleviale di combil                                  | ic names   |                 |
|  |  |  |  |                 |
| 11b. INDIVIDUAL'S LAST NAME  |  | FIRST NAME   | MIDDLE NAME  | SUFFIX          |
|  |  |  |  |                 |
| MAILING ADDRESS  |  | СПҮ  | STATE POSTAL CODE                                  | COUNTRY         |
| and the same of th |  |  |  |                 |
| ORGAN  | INFO RE 11e. TYPE OF ORGANIZATION NIZATION | 11f. JURISDICTION OF ORGANIZATION  | 11g. ORGANIZATIONAL ID #, if an                    |                 |
| DEBTO  |  |  |  | NO              |
| ADDITIONAL SECURED  12a. ORGANIZATION'S NAME   | PARTYS of Massignors/PS                    | NAME - insert only one name (12a or 12b)   |  |                 |
|  |  |  |  |                 |
| 12b. INDIVIDUAL'S LAST NAME  |  | FIRST NAME   | MIDDLE NAME  | SUFFIX          |
|  |  |  |  |                 |
| MAILING ADDRESS  |  | CITY   | STATE POSTAL CODE                                  | COUNTRY         |
|  |  |  |  |                 |
| This FINANCING STATEMENT cover   |  | 16. Additional collateral description:   |  |                 |
| collateral, or is filed as a   | e filing.                                  |  |  |                 |
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|  |  |  |  |                 |
|  | DWNER of above-described real estate       |  |  |                 |
| (if Debtor does not have a record int  | erest):                                    |  |  |                 |
|  |  |  |  |                 |
|  |  |  |  | _               |
|  |  | 17. Check only if applicable and check only  | one box.   |                 |
|  |  | 17. Check only if applicable and check only on Debtor is a Trust or Trustee acting |  | Decedent's Esta |
|  |  |  | with respect to property held in trust or          | Decedent's Esta |
|  |  | Debtor is a Trust or Trustee acting  | with respect to property held in trust or one box. | Decedent's Esta |