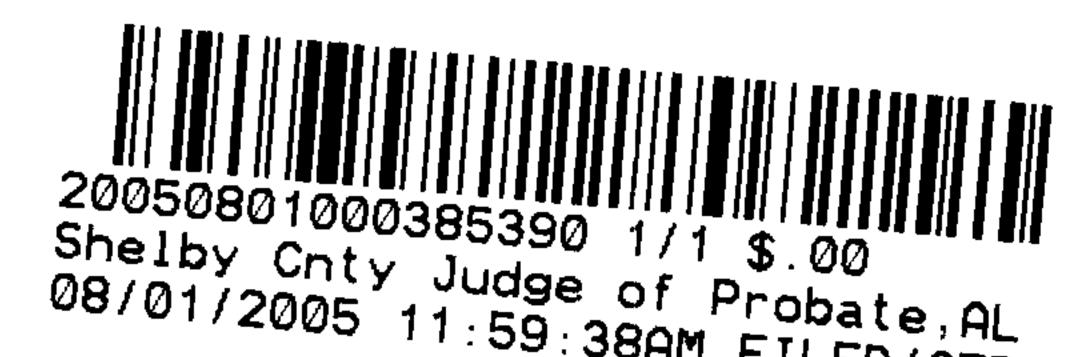
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		11:59:38AM FILED	/CERT
ICC FINANCING STATEMENT AMENDIV	1ENT		
OLLOW INSTRUCTIONS (front and back) CAREFULLY			
N. NAME & PHONE OF CONTACT AT FILER [optional]			
3. SEND ACKNOWLEDGMENT TO: (Name and Address)			
algasco			
	THE ABOVE	SPACE IS FOR FILING OFFICE USE	ONLY
a. INITIAL FINANCING STATEMENT FILE #		1b. This FINANCING STATEMENT to be filed [for record] (or record)	
2003 - 54824 ONTERNATIONS - 54824		to be filed [for record] (or record) REAL ESTATE RECORDS.	
JERMINATION: Effectiveness of the Financing Statement identified a			· · · · · · · · · · · · · · · · · · ·
CONTINUATION: Effectiveness of the Financing Statement identification continued for the additional period provided by applicable law.	ried above with respect to security interest(s) of the Seci	ured Party authorizing this Continuation State	tement is
ASSIGNMENT (full or partial): Give name of assignee in item 7a or 7	7b and address of assignee in item 7c; and also give nam	e of assignor in item 9.	
AMENDMENT (PARTY INFORMATION): This Amendment affects			
Also check one of the following three boxes and provide appropriate informa	ation in items 6 and/or 7.		
CHANGE name and/or address: Give current record name in item 6a or name (if name change) in item 7a or 7b and/or new address (if address	r 6b; also give new DELETE name: Give record rechange) in item 7c. to be deleted in item 6a or 6b.		or 7b, and also d-7g (if applicable
CURRENT RECORD INFORMATION: 6a. ORGANIZATION'S NAME			
Oa. ORGANIZATION S NAIVIE			
R 6b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
Camer	50-2		
CHANGED (NEW) OR ADDED INFORMATION:			
7a. ORGANIZATION'S NAME			
₹	TEIRST NAME	MIDDLE NAME	SUFFIX
7b. INDIVIDUAL'S LAST NAME	FIRST NAME	MIDDLE NAME	SUFFIX
R 7b. INDIVIDUAL'S LAST NAME c. MAILING ADDRESS	CITY	STATE POSTAL CODE,	SUFFIX
7b. INDIVIDUAL'S LAST NAME c. MAILING ADDRESS	CITY		
7b. INDIVIDUAL'S LAST NAME MAILING ADDRESS DO 2 Chanda Nood Or I. TAX ID #: SSN OR EIN ADD'L INFO RE 7e. TYPE OF ORGANIZATION	CITY Pe/ham	STATE POSTAL CODE,	
7b. INDIVIDUAL'S LAST NAME 3. MAILING ADDRESS 2021 Chandawood Dr	CITY Pe/ham	STATE POSTAL CODE	COUNTRY
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