

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90043 010 ***150.00

DOCUMENT # 346273

1. Entity Name
N H D DEVELOPMENTS INC



Principal Place of Business
**3700 STEELES AVENUE WEST #800
WOODBIDGE ONTARIO L4L 8M9
CANADA, XX**

Mailing Address
**3700 STEELES AVENUE WEST #800
WOODBIDGE ONTARIO L4L 8M9
CANADA, XX**

60006317



01112007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-1387072

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MURPHY, EUGENE W., JR.
340 ROYAL PALM WAY
PALM BCH., FL 33480**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PDT SORBARA, EDWARD 3700 STEELES AVE W#800 WOODBIDGE, ONTARIO, CA L4L 8M9
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVD SORBARA, JOSEPH D. 3700 STEELES AVE W#800 WOODBIDGE, ONTARIO, CA L4L 8M9
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD SORBARA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #