05-17-1999 90024 050 \*\*\*150.00

1 (1804) | 1816 | 1916 | 1816 | 1806 | 1806 | 1806 | 1806 | 1806 | 1806 | 1806 | 1806 | 1806 | 1806 | 1806 | 1

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 838741 1. Corporation Name

GROSSMAN HOLDINGS LIMITED (INCORPORATED)

			_			İ						
Principal Place of Business Mailing Address					<del></del>		1 10018 1001 11101 10111 10111 10111 10111 11	i digil bi	111 WIND	PIBIL BI	B)( 8181) (1881	
970 LAWRENCE AVE., WEST 970 LAWRENCE AVE., WEST												
SUITE 303 SUITE 303												
CANADA M6A 3B6 CANADA M6A 3B6							DO NOT WRITE IN	THIS	SPACE	Ē		
US US						3	. Date Incorporated or Qualifed					
							07/06/1977					
Principal Place of Business     Za. Mailing Address							. FEI Number			App	olied For	
21 26							98-0033709	Not Applicable				
Suite, Apt. #, etc Suite, Apt. #, e							. Certifcate of Status Desired		\$8.	75 A	dditional	
22		27	27				. Certificate of Status Desired		F	ee Re	quired	
City & Sta	te	City & State	City & State			6	. Election Campaign Financing		\$5	.00	May Be	
23		28	28			}	Trust Fund Contribution Added to Fees					
Zip	Country Zip Cou			untry		8	8. This corporation owes the current year Intangible					
24	25 29 30					-	Personal Property Tax.  Yes No					
9. Name and Address of Current Registered Agent						10	. Name and Address of New Regis	tered A	gent			
				81	Name	}					- <del></del>	
	urig, robert H., esq.			-								
1401 BRICKELL AVE				82	Street	Address (	P.O. Box Number is Not Acceptable)					
PENTHOUSE				83								
MIAMI FL 33131											1	
				84	City				85	Zip C	ode	
	(0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0	500 1007 1500 51 11 01		ĻŢ		<del>. —</del>		<u>FL</u>	<u>ĻĻ</u>			
11. Pursuant	to the provisions of Sections 607,0 registered agent, or both, in the Stat	502 and 607.1508, Florida St te of Florida. Such change wa	atutes, the a is authorize	ibove d by t	≻named the coro	l corporation poration's b	on submits this statement for the purple locard of directors. I hereby accept the	ose of a	:hangir tment	ng its r as red	egistered istered	
agent. I a	am familiar with, and accept the obli	gations of, Section 607.0505,	Florida Stat	tutes.			cours of singulation ( Mores) accept the	аррош		uo rog	10.0.00	
SIGNATURE												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Register					t signature r	required when	reinstating) D/	Ϋ́Е				
12.	T			13.		<del>,</del>	ADDITIONS/CHANGES TO OFFICE	RS AND				
TITLE	PD				1.1 TITLE				☐ Cha	ange	☐ Addition	
NAME	GROSSMAN, A.E.		1.2 N	1.2 NAME		1						
STREET ADDRESS	3900 YONGE ST, #P-4		1,3 S	1.3 STREET ADDRESS		l						
CITY-ST-ZIP	TORONTO, CANADA		1.4 C	1.4 CITY+ST-ZIP		1						
TITLE				2.1 TITLE		<del> </del>			Cha	ange	Addition	
NAME	00000441 0 11			2.2 NAME		}				٠	_	
STREET ADDRESS	AA PIRRALING OR			2.3 STREET ADDRESS							1	
	TORONTO, ONT, CA		1	<b>1</b>		1					l	
CITY-ST-ZIP TITLE	V DELETE			2.4 CITY-ST-ZIP 3.1 TITLE		<del> </del>			∏ Cha		Addition	
				l l						iiiQe	Auditon	
NAME			1	3.2 NAME							·	
STREET ADDRESS	148 FISHERVILLE ROAD		3.3 \$	3.3 STREET ADDRESS								
CITY-ST-ZIP	WILLOWDALE, CANADA			3.4 CITY-ST-ZIP		ļ						
TILE	\$ DELETE		4,1 17	4.1 TITLE					Cha	inge	Addition	
NAME	HENRY, ROBERT W		4.2 N	4. 2 NAME							}	
STREET ADDRESS			4.3 S	4.3 STREET ADDRESS								
CITY-ST-ZIP	TORONTO, CANADA		4,4 C	4.4 CITY-ST-ZIP		[					ĺ	
TITLE				5.1 TITLE		T	<u> </u>		Cha	ange	☐ Addition	
NAME	PETERS, VICTOR		5.2 N	ME	İ					-	1	
STREET ADDRESS			5.3 \$	TREET.	address .	]					}	
CITY-ST-ZIP				TY-ST							ļ	
TITLE	HOME TOTAL ON AFILO MOL	DELETE	6.1 TI			<del> </del>			[] Cha	nge	Addition	
		ר"ו הברבוב	6.2 N/							nge	☐ vacinou	
NAME												

14. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR