


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 26, 2004 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 849713</b> 1. Entity Name DBK INVESTMENTS, LIMITED INCORPORATED	
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Principal Place of Business BREAKERS WEST CONDO APT A4 3041 WEST GULF DRIVE SANIBEL, FL 33957	Mailing Address 1155 METCLAFE ST. STE 2040 MONTREAL, QUE, h3-b2w6
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**DO NOT WRITE IN THIS SPACE**



03242004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-1784389	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

LOUWERS, THOMAS R  
1619 PERIWINKLE WAY STE 102  
SANIBEL, FL 33957

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

1100000096885  
 03/26/04-80017-004 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DRUMMOND, KEVIN RT 202 HAVELOCK QUEBEC, CA jos2c0
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DRUMMOND, DEREK A 4373 MONTROSE AVE WESTMONT, QUEBEC, CA h3y2b2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRODEUR, BARBARA 565 ROSLYN AVE WESTMONT, QUEBEC, CA h3y2t7
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BRODEUR, JAMES H 565 ROSLYN AVE WESTMONT, QUEBEC, CA h3y2t7
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRUMMOND, ANNE 4373 MONTROSE AVE WESTMONT, QUEBEC, CA h3y2t7
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRUMMOND, MARY RT 202 HAVELOCK QUEBEC, CA jos2c0

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: J. H. Brodeur J. H. BRODEUR March 24 2004 514 866 1227  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #