2004 FOR PROFIT CORPORATION ANNUAL REPORT

03-31-2004 90021 035 ***150.00
F03000004506

DOCUMENT # F03000004506

Entity Name
ENGINEERING.COM INCORPORATED

FILED
04 APR 20 PM 2:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
40 VILLAGE CENTRE PLACE MISSISSAUGA ONTARIO L4W1V9, OC	40 VILLAGE CENTRE PLACE MISSISSAUGA ONTARIO L4W1V9, OC

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City, State Mississauga, Ontario	City, State Mississauga, Ontario
Zip / Country Canada	Zip / Country Canada

CR2E034 (10/03)

4. FEI Number: 98-0401525 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	Name: CT Corporation System Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road City: Plantation FL Zip Code: 33324

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 accep 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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BALDESARRA, FRANK 5285 SOLAR DRIVE ~~MISSISSAUGA~~ ONTARIO L4W5B8,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP SEMKIW, BRIAN 5285 SOLAR DRIVE ~~MISSISSAUGA~~ ONTARIO L4W5B8,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mississauga	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	OST BALDESARRA, RON 5285 SOLAR DRIVE ~~MISSISSAUGA~~ ONTARIO L4W5B8,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mississauga	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I 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 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: _____ March. 25/04 905-625-2000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

TK