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INTERNATIONAL TAXATION

S. L. RICHARD BRUNTON & Co., CPAS

CHARTERED

CERTIFIED PUBLIC ACCOUNTANTS

CROSS-BORDER TAXATION

CROSS-BORDER FINANCIAL MANAGEMENT

IMMIGRATION SUPPORT

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S.L. RICHARD BRUNTON, CPA
ELIZABETH H. MCCARTHY, CPA

FLORIDA FACILITIES IN TAMPA,
SARASOTA, NAPLES AND BOCA RATON

September 8, 2000

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-09/11/00--01086--015
*****35.00 *****35.00

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Dear Sir or Madame:

SUBJECT: 960121 ONTARIO INC.
WITHDRAWAL OF AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Kindly find enclosed the Application by Foreign Corporation for Withdrawal of Authority to Transact Business in Florida for the above-mentioned corporation. A check for \$35 is also enclosed to cover the filing fees.

We would be grateful if you would acknowledge receipt of this application.

Yours truly,

Tonya Fleming
Tonya Fleming

TF/

Encl.

FILED
00 SEP 11 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

with
DS
9/19/00

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL
OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS
IN FLORIDA**

960121 ONTARIO INC.

(Name of Corporation)

CANADA

(Incorporated Under Laws Of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

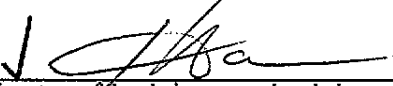

672 JOHNSTON PARK AVE.

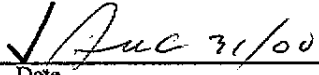
(Mailing Address)

COLLINGWOOD ON CANADA L9Y 4T9

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

  **Pres.**
Signature of the chairman or vice chairman of the board, president, or any officer. Title

KEN HAVENS 
Typed or printed name Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 SEP 11 AM 11:24

FILED