PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

OCUMENT

F96000006200

i. Corporation Name

12013400, LTD. INC.

4999 2000

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Mailing Address 1600-1055 W Hastings St. 1600-1055 W Hastings St. Vancouver, B.C. V6E 2H2 Vancouver, B.C. V6E 2H	34 - 150-00 THIS SPACE
2a. Mailing Address	34 - 150.00 THIS SPACE
2a. Mailing Address	THIS SPACE
3. Date Incorporated or Qualifed 11/26/1996 7. Principal Place of Business 2a. Mailing Address 24. FEI Number 91–1500759 Suite, Apt. #, etc. 5. Certificate of Status Desired	THIS SPACE
11/26/1996	
Principal Place of Business 2a. Mailing Address 4. FEI Number 91–1500759 Suite, Apt. #, etc. 5. Certificate of Status Desired	
26 91-1500759 Suite, Apt. #, etc. 5. Certificate of Status Desired	
Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired	Applied For
5. Certificate of Status Desired □	Not Applical
	Fee Required
City & State City & State 6. Election Campaign Financing	
28 Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country Zip Country 8. This corporation owes the current year	
25 29 30 Personal Property Tax.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Register	
81 Name	
C T CORPORATION SYSTEM 82 Street Address (P.O. Box Number is Not Acceptable)	
1200 South Pine Island Road	
Plantation, FL 33324	
84 City	FL 85 Zip Code
1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the a	
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.	.,
SIGNATURE	
Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) . DAT	
2. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICER TLE DP SOME DELETE 1.1 TITLE DP	
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AME SCHELLENBERG, DAVID 12NAME KORENBERG, MICHAEL	
TREET ADDRESS 2185-140A STREET 13 STREET ADDRESS 1600-1055 WEST HASTINGS	
TY-ST-ZIP SOUTH SURREY BC V4A 9R8 14CITY-ST-ZIP VANCOUVER, B.C. V6E 2H2	
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SIGNATURE:

SISTATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Nick Desmarais, Secretary

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(604)688-6764 Daytime Phone #