

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 01, 2002 8:00 am**  
**Secretary of State**

08-01-2002 90164 049 \*\*\*550.00

0190610 IN

**DOCUMENT # L44954**  
 1. Entity Name  
**EVANSMARTIN, INC.**

Principal Place of Business <b>665 MARDEL COURT          #102 (BIRKSHIRE LANDING)          NAPLES FL 34104          US</b>	Mailing Address <b>56 QUEEN ST E STE 300          BRAMPTON ON L6-V2-8          US</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address <b>56 Queen Street East</b> Suite, Apt. #, etc. <b>Suite 300</b> City & State <b>Brampton, Ontario</b> Zip <b>L6V 4M8</b>	4. FEI Number <b>65-0188959</b>	Applied For <input type="checkbox"/> Not Applicable
Country <b>US</b>	Country <b>CANADA</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent <b>SMITH, WILLIAM R 8191 COLLEGE PARKWAY STE 204 FT MYERS FL 33919</b>	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code
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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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$550.00</b> <b>After September 13, 2002 Fee will be \$750.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD RUDENSKY, WALLY 4 JOHN BECK CRESCENT BRAMPTON, ONTARIO L6W 2T3</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TD MARTIN, JOHN 15 HERNE HILL ISLINGTON, ONTARIO M9A 2W9</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALLY RUDENSKY **REQUIREMENT RUDENSKY** **JULY 10, 2002 905-4330252**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (DIRECTOR) Date Daytime Phone #

CR2E034 (4/02)

Attachment  
Dr. # L44954

**WILLIAM R. SMITH, P.A.**

ATTORNEY AND COUNSELOR AT LAW  
TELEPHONE: 941 482-8511  
FACSIMILE: 941 482-1007

July 29, 2002

8191 COLLEGE PARKWAY  
SUITE 204  
FORT MYERS, FLORIDA 33919

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

EVANSMARTIN, INC. - #L44954

Enclosed is the 2002 Uniform Business Report along with a check for \$550.00. Please change the mailing address of this corporation to:

Evansmartin, Inc.  
56 Queen Street East, Suite 300  
Brampton, Ontario, CANADA L6V 4M8

If you have any questions, please call.

*William R. Smith wlm*  
WILLIAM R. SMITH

WRS/wlm

Enclosures - As described

cc: Wally Rudensky