

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**APPROVED
AND
FILED**

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

95 JUL 25 AM 9:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M43559
1. Corporation Name

T.R.L. MARCO, INC.

Principal Place of Business: **c/o David Feldman, 407 Lincoln Road N.E., Penthouse, Miami Beach, FL. 33139**
Mailing Address: **c/o David Feldman, 407 Lincoln Road, N.E., Penthouse, Miami Beach, FL. 33139**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **12/19/86** 3a. Date of Last Report: **5/20/94**
4. FEI Number: **59-2809193** Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes: Yes No

2. Principal Place of Business: **21 920 Yonge Street**
Suite, Apt. #, etc: **22 Suite 1000**
City & State: **23 Toronto, Ontario**
Zip: **24 M4W 3C7** Country: **25 CANADA**

2a. Mailing Address: **26 920 Yonge Street**
Suite, Apt. #, etc: **27 Suite 1000**
City & State: **28 Toronto, Ontario**
Zip: **29 M4W 3C7** Country: **30 Canada**

9. Name and Address of Current Registered Agent
**CT Corporation System
1200 South Pine Island Road
Plantation, Florida 33324**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: _____
Signature: Hand or printed name of registered agent and title of agent (required) (Not Required Agent Signature required when transferring) (Date)

12. OFFICERS AND DIRECTORS

TITLE	Director/President
NAME	Cooper, Richard
STREET ADDRESS	920 Yonge Street, Suite 1000
CITY, ST, ZIP	Toronto, Canada M4W 3C7
TITLE	VP/SECY/TREAS
NAME	Cooper, Sydney Charles
STREET ADDRESS	920 Yonge Street, Suite 1000
CITY, ST, ZIP	Toronto, Ontario M4W 3C7
TITLE	Vice-President
NAME	Bekhor, Edward Ezra
STREET ADDRESS	920 Yonge Street, Suite 1000
CITY, ST, ZIP	Toronto, Ontario M4W 3C7
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	800001547998
21 TITLE	-07/27/95--01996--015
22 NAME	****225.00 ****225.00
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	7/25/95 HST
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 unchanged, or on an attachment with an address.

SIGNATURE: *[Signature]* **RICHARD COOPER, PRESIDENT** **July 20, 1995** (416) 964-1800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone Number