

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P15810 (5)**  
1. Corporation Name  
**152944 CANADA INC.**



Principal Place of Business: **17094 COLLINS AVE SUITE A104 MIAMI BEACH FL 33160**  
Mailing Address: **17094 COLLINS AVE SUITE A104 MIAMI BEACH FL 33160**

2. Principal Place of Business (21-24) and Mailing Address (26-29) fields with sub-sections for Suite, Apt. #, City & State, and Zip/Country.

3. Date Incorporated or Qualified: **09/02/1987**  
3a. Date of Last Report: **03/31/1995**  
4. FEI Number: **59-1495706**  
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

9. Name and Address of Current Registered Agent  
**KLINE, ARTHUR J.  
2665 S. BAYSHORE DRIVE, S-903  
COCONUT GROVE FL 33133**

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

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, typed or printed name of registered agent and title, if applicable) DATE: \_\_\_\_\_ (Date)

12. OFFICERS AND DIRECTORS  
 TITLE NAME STREET ADDRESS CITY-ST-ZIP  
 ASP LESNIAK, ROMAN 6005 CAVENDISH BLVD PH3 COTE ST. LUC, QUEBEC  
 VD LESNIAK, IRWIN 6005 CAVENDISH BLVD PH3 COTE ST LUC, QUEBEC  
 SD LESNIAK, GRACE 6005 CAVENDISH BLVD PH3 C.S.L, QUEBEC  
 D LESNIAK, ROMAN 6005 CAVENDISH BLVD PH3 COTE ST. LUC, QUEBEC

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
 1.1 TITLE  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY-ST-ZIP  
 2.1 TITLE  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY-ST-ZIP  
 3.1 TITLE  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP  
 4.1 TITLE  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP  
 5.1 TITLE  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP  
 6.1 TITLE  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

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3-27-96

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)(k), 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 if changed, or on an attachment with an address.

SIGNATURE: **Roman Lesniak (Roman Lesniak)** 2-29-1996 305-9451050  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (12/95)