

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90241 043 ***150.00

DOCUMENT # P94000086679

1. Entity Name
FORREC U.S., INC.



Principal Place of Business
**925 TRUMAN AVE
KEY WEST FL 33041
US**

Mailing Address
**P O BOX 4502
KEY WEST FL 33041
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3297343**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**F & L CORP.
200 LAURA STREET
THIRD FLOOR
JACKSONVILLE FL 32201-0240**

Name
Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☒ Delete
NAME **MCNAIR, JEFFREY A**
STREET ADDRESS **9 BLANCHARD RD.**
CITY-ST-ZIP **TORONTO ONTARIO, CANADA M4N3M-1**

TITLE **P (President)** ☐ Change ☒ Addition
NAME **Dorrett, Gordon**
STREET ADDRESS **33 Langmuir Crescent**
CITY-ST-ZIP **Toronto, Ontario, Canada M6S 2A8**

TITLE **SD** ☐ Delete
NAME **SCHEFTER, HENRY**
STREET ADDRESS **39 DUPONT ST.**
CITY-ST-ZIP **TORONTO ONTARIO CANADA M5R1V-3**

TITLE **V (Vice President)** ☐ Change ☒ Addition
NAME **Rhys, Steven**
STREET ADDRESS **39 Neighbourly Lane**
CITY-ST-ZIP **Richmond Hill, Ontario, Canada L4C 5M4**

TITLE **D** ☒ Delete
NAME **MOORHEAD, STEVEN A**
STREET ADDRESS **41 ROXBOROUGH ST. EAST**
CITY-ST-ZIP **TORONTO ONTARIO, CANADA M4W1V-5**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4 FEB 2003
416 696-8000

CR2E034 (10/02)