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FILED
Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000000583 (1)

1. Corporation Name
PERLAINE US, INC.



Principal Place of Business
5009 PARK CENTRAL DR
ORLANDO FL 32839

Mailing Address
10 CONRAD AVENUE
TORONTO, ONTARIO, CANADA
OC

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/04/1995

2. Principal Place of Business
21 5145 City St.

Suite, Apt. #, etc.

22 City & State
23 ORLANDO, FL

24 Zip 32839 25 Country

2a. Mailing Address

Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

4. FEI Number

59-3298733

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

JOHNSON, LORAN A
215 N EOLA DR
ORLANDO FL 32801

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME GOLDBERG, LAURENCE
STREET ADDRESS 10 CONRAD AVENUE
CITY-ST-ZIP TORONTO, ONTARIO, CANADA ☐ DELETE

TITLE D
NAME GOLDBERG, ELAINE
STREET ADDRESS 134 HANDSART BLVD
CITY-ST-ZIP WINNIPEG MANITOBA CANADA ☐ DELETE

TITLE D
NAME GOLDBERG, PERCY
STREET ADDRESS 134 HANDSART BLVD
CITY-ST-ZIP WINNIPEG MANITOBA CANADA ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE D ☒ Change ☐ Addition
2.2 NAME GOLDBERG, ELAINE
2.3 STREET ADDRESS #3 - 393 WELLINGTON CRESCENT
2.4 CITY-ST-ZIP WINNIPEG, MANITOBA CANADA R3M 0A1

3.1 TITLE D ☒ Change ☐ Addition
3.2 NAME GOLDBERG, PERCY
3.3 STREET ADDRESS #3 - 393 WELLINGTON CRESCENT
3.4 CITY-ST-ZIP WINNIPEG, MANITOBA CANADA R3M 0A1

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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:

7-1 9/98

(416)
966-6850

CR2E034 (10/97)