

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

FILED
Mar 28 1996 8:00 am
Secretary of State

DOCUMENT # **P95000069672 (0)**

1. Corporation Name

5715 MAJOR BOULEVARD INC.



Principal Place of Business

**2 ST. CLAIR AVENUE WEST
SUITE 701
TORONTO.ONT..CANADA M4V 1L5
OC**

Mailing Address

**2 ST. CLAIR AVENUE WEST
SUITE 701
TORONTO.ONT..CANADA M4V 1L5
OC**

2. Principal Place of Business

2a. Mailing Address

21	State, Apt. #, etc.	26	State, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25		30	Country

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

3. Date Incorporated or Qualified	3a. Date of Last Report
09/11/1995	
4. FLI Number	Applied For
59-333 9701	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0500 and 607.1500, Florida Statutes, the above named corporation is hereby making this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change will be effective if the corporation's board of directors, thereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Sections 607.0500, Florida Statutes.

SIGNATURE _____ DATE _____

12. OFFICERS AND DIRECTORS

12.1	TITLE	<input type="checkbox"/> DELETE
12.2	NAME	
12.3	STREET ADDRESS	
12.4	CITY, ST, ZIP	
12.5	TITLE	<input type="checkbox"/> DELETE
12.6	NAME	
12.7	STREET ADDRESS	
12.8	CITY, ST, ZIP	
12.9	TITLE	<input type="checkbox"/> DELETE
12.10	NAME	
12.11	STREET ADDRESS	
12.12	CITY, ST, ZIP	
12.13	TITLE	<input type="checkbox"/> DELETE
12.14	NAME	
12.15	STREET ADDRESS	
12.16	CITY, ST, ZIP	
12.17	TITLE	<input type="checkbox"/> DELETE
12.18	NAME	
12.19	STREET ADDRESS	
12.20	CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2	NAME	
13.3	STREET ADDRESS	
13.4	CITY, ST, ZIP	
13.5	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.6	NAME	
13.7	STREET ADDRESS	
13.8	CITY, ST, ZIP	
13.9	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.10	NAME	
13.11	STREET ADDRESS	
13.12	CITY, ST, ZIP	
13.13	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14	NAME	
13.15	STREET ADDRESS	
13.16	CITY, ST, ZIP	

DIRECTOR AND P
JONAS JACOB PRINCE
2 St. Clair Avenue West, Suite 701
Toronto, Ontario, Canada, M4V 1L5
DIRECTOR AND S
Geoffrey Wayne Squibb
2 St. Clair Avenue West, Suite 701
Toronto, Ontario, Canada, M4V 1L5

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***200.00

14. I do hereby certify that the information shown on this filing is accurately furnished and does not qualify for the exemption stated in Section 119.07(5)(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; and that I am a resident of the State of Florida. I execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on a separate sheet with an attached filing fee.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JONAS JACOB PRINCE Feb 27 1996 (416) 923-1919
SG 3-28-96

CR2E034 (12/95)