


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 11, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # S11026**  
1. Entity Name  
**BUSCH DEVRIN, INC.**



Principal Place of Business      Mailing Address  
**1002 SHERBROOKE ST. W., SUITE 2625**      **1002 SHERBROOKE ST. W., SUITE 2625**  
**MONTREAL, QUEBEC, H3A 3L6**      **MONTREAL, QUEBEC, H3A 3L6**  
**CANADA, XX**      **CANADA, XX**

**DO NOT WRITE IN THIS SPACE**



04072006      No Chg-P      CR2E034 (11/05)

4. FEI Number      Applied For  
**59-3080531**      Not Applicable

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

6. Name and Address of Current Registered Agent  
**MAYERS, ALEXANDER**  
**2121 N OCEAN BLVD**  
**APT 1007-E**  
**BOCA RATON, FL 33431**

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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


U00000502168  
04/25/06-80094-010 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MAYERS, ALEXANDER
STREET ADDRESS	1002 SHERBROOKE ST.W., SUITE 2625
CITY-ST-ZIP	MONTREAL, QUEBEC CANADA, h3a 3l6
TITLE	P
NAME	GARTNER, MICHAEL
STREET ADDRESS	1002 SHERBROOKE ST.W., SUITE 2625
CITY-ST-ZIP	MONTREAL, QUEBEC CANADA, h3a 3l6
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  **MICHAEL GARTNER**      **APRIL 7/06**      **514-845-0241**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #