


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2008 08:00 AM
Secretary of State

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



Principal Place of Business 1002 SHERBROOKE ST. W., SUITE 2625 MONTREAL, QUEBEC, H3A 3L6 CANADA, XX	Mailing Address 1002 SHERBROOKE ST. W., SUITE 2625 MONTREAL, QUEBEC, H3A 3L6 CANADA, XX
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03312008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3080531	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000280039 04/15/08-80045-014 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAYERS, ALEXANDER 1002 SHERBROOKE ST.W., SUITE 2625 MONTREAL, QUEBEC CANADA, h3a 3l6
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARTNER, MICHAEL 1002 SHERBROOKE ST.W., SUITE 2625 MONTREAL, QUEBEC CANADA, h3a 3l6
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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: *M Gartner* **MICHAEL GARTNER** **MARCH 31 2008** **514-845-0241**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #