## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F03000004421

Entity Name: CONTRAST LIGHTING M.L. INC.

FILED Feb 10, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1009 PARK INDUSTRIEL ST-JEAN-CHRYSOSTOME, QUEBEC CANADA G6Z 1C5, CA 00000

Current Mailing Address: New Mailing Address:

1009 PARK INDUSTRIEL ST-JEAN-CHRYSOSTOME, QUEBEC CANADA G6Z 1C5, CA 00000

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ARD, SHIRLEY & HARTMAN, P.A. 207 WEST PARK AVENUE, SUITE B TALLAHASSEE, FL 32301 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

Electronic dignature of Neglatered Agent

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD () Delete Title: PCD (X) Change () Addition

 Name:
 LECLUZE, MICHEL
 Name:
 LECLUZE, MICHEL

 Address:
 1009 PARC INDUSTRIEL
 Address:
 1009 PARC INDUSTRIEL

City-St-Zip: ST JOHN CHRYSOSTOME, CANADA, CA 00000 City-St-Zip: ST JOHN CHRYSOSTOME, CANADA, CA G6Z1C5

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad \qquad (\ ) \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad \qquad ({\sf X}) \ {\sf Change} \ (\ ) \ {\sf Addition}$ 

Name: LECLUZE, PASCAL Name: LECLUZE, PASCAL
Address: 1009 PARC INDUSTRIEL Address: 1009 PARC INDUSTRIEL

City-St-Zip: ST JOHN CHRYSOSTOME, CANADA, CA 00000 City-St-Zip: ST JOHN CHRYSOSTOME, CANADA, CA G6Z1C5

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHEL LECLUZE PCD 02/10/2005