# 2005 FOR PROFIT CORPORATION REINSTATEMENT

**FILED**
**Oct 06, 2005**
**Secretary of State**

DOCUMENT# F04000001677

**Entity Name:** ONTARIO INVESTMENTS, INC.

**Current Principal Place of Business:**

6666 OLD COLLAMER ROAD
EAST SYRACUSE, NY 13057

**New Principal Place of Business:**

**Current Mailing Address:**

6666 OLD COLLAMER ROAD
EAST SYRACUSE, NY 13057

**New Mailing Address:**

**FEI Number: 16-1224033** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

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

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: JEANINE REYNOLDS

Electronic Signature of Registered Agent — Date

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: MARSALLO, JAMES M
Address: 6666 OLD COLLAMER ROAD
City-St-Zip: EAST SYRACUSE, NY 13057

Title: V ( ) Delete
Name: MARSALLO, JAMES M JR.
Address: 6666 OLD COLLAMER ROAD
City-St-Zip: EAST SYRACUSE, NY 13057

Title: S ( ) Delete
Name: MARSALLO, MARYANN
Address: 6666 OLD COLLAMER ROAD
City-St-Zip: EAST SYRACUSE, NY 13057

Title: T ( ) Delete
Name: MARSALLO, MICHAEL S
Address: 6666 OLD COLLAMER ROAD
City-St-Zip: EAST SYRACUSE, NY 13057

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JAMES MARSALLO, JR. V 10/06/2005

Electronic Signature of Signing Officer or Director — Date