

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 838742

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: BLEEMAN HOLDINGS LIMITED (INCORPORATED)

**Current Principal Place of Business:**

970 LAWRENCE AVE WEST  
SUITE 304  
TORONTO, ON M6A 3B6 CA

**New Principal Place of Business:**

**Current Mailing Address:**

970 LAWRENCE AVE WEST  
SUITE 304  
TORONTO, ON M6A 3B6 CA

**New Mailing Address:**

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

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

CUSTER, J. MICHAEL  
2699 SOUTH BAYSHORE DRIVE  
MIAMI, FL 33133 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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BLEEMAN, ABRAHAM  
Address: 17 REDDICK CT  
City-St-Zip: TORONTO,, ON M6B 2S1 CA

Title: V ( ) Delete  
Name: BLEEMAN, AARON  
Address: 146 DALEMOUNT AVE  
City-St-Zip: TORONTO,, ON M6B 3C9 CA

Title: V ( ) Delete  
Name: BLEEMAN, N  
Address: 550 COLDSTREAM AVE  
City-St-Zip: TORONTO,, ON M6B 2K9 CA

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

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

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

Title: V (X) Change ( ) Addition  
Name: BLEEMAN, NATHAN  
Address: 550 COLDSTREAM AVE  
City-St-Zip: TORONTO,, ON M6B 2K9 CA

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ABRAHAM BLEEMAN

PD

02/25/2009

Electronic Signature of Signing Officer or Director

Date