I hereby 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 all other like empowered.

DR.

SIGNATURE: MORRIS SAMSON

Electronic Signature of Signing Officer/Director Detail

# y submits this statement for the purpose of c

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
Officer/Director Detail :

Title	DR	Title	MRS
Name	SAMSON, MORRIS	Name	PALLEY-SAMSON, MARILYN
Address	7 NORTHBANK COURT	Address	7 NORTHBANK COURT
City-State-Zip:	THORNHILL ON L3T7J-7	City-State-Zip:	THORNHILL ON L3T7J-7

# 2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F0900000351

Entity Name: 2116405 ONTARIO INC.

# Current Principal Place of Business:

10275 COLLINS AVE 1222 BAL HARBOR, FL 33154

### **Current Mailing Address:**

10275 COLLINS AVE 1222 BAL HARBOR, FL 33154

#### FEI Number: 98-0606251

## Name and Address of Current Registered Agent:

SHAPIRO, IRA R 16375 NE 18TH AVENUE #225 NORTH MIAMI BEACH, FL 33162 US Certificate of Status Desired: No

02/03/2014

Date