

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P36320

**FILED**  
**Feb 11, 2014**  
**Secretary of State**  
**CC4762052785**

**Entity Name:** 12684 CORPORATION

**Current Principal Place of Business:**

EMIL C. MARQUARPT  
625 COURT STREET  
CLEARWATER, FL 33756

**Current Mailing Address:**

50 BARTOR RD  
TORONTO, ON CA

**FEI Number:** 51-0334546

**Certificate of Status Desired:** No

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

MARQUARDT, EMIL C., JR.  
625 COURT STREET  
2ND FLOOR  
CLEARWATER, FL 33756 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

**Officer/Director Detail :**

Title PS  
Name ROSE, BARRIE D.  
Address 1 ST THOMAS ST., SUITE 25B  
City-State-Zip: TORONTO ON

Title AS  
Name ROSE, JOHN A.  
Address 165 OLD FOREST HILL ROAD  
City-State-Zip: TORONTO ON

Title AS  
Name ROSE, ROBERT A.  
Address 44 S. JOSEPH STREET, STE 2614  
City-State-Zip: TORONTO ON

Title AS  
Name ROSE, PAUL A  
Address 30 SUMMERHILL AV  
City-State-Zip: TORONTO ON

*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.*

**SIGNATURE:** BARRIE ROSE

**PRESIDENT**

**02/11/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date