

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 31, 2004 8:00 am
Secretary of State

03-31-2004 90007 023 ***150.00

DOCUMENT # 626608

1. Entity Name

OUTPUT CONSTRUCTION, INC.



Principal Place of Business

C/O SANFORD REINHARD
2875 NE 191ST STREET, #404
NORTH MIAMI BCH. FL 33180

Mailing Address

C/O SANFORD REINHARD
2875 NE 191ST STREET, #404
NORTH MIAMI BCH. FL 33180

54024370



MOORE CR2E034 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-1938432

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REINHARD, SANFORD N., P.A.
C/O SANFORD REINHARD
2875 NE 191ST STREET, #404
NORTH MIAMI BCH. FL 33180

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME GOLDLIST, HARRY
STREET ADDRESS 1 CLARK AVE. WEST, UNIT 1104
CITY-ST-ZIP THORNHILL, ONTARIO L4J 7Y7

TITLE S ☐ Delete
NAME GOLDLIST, BARRY GORDON
STREET ADDRESS 138 GREY RD.
CITY-ST-ZIP TORONTO, ONTARIO M5M 2L3 FL

TITLE V ☐ Delete
NAME RAPP, PAULINE
STREET ADDRESS 24 MCMORRAN CRESCENT
CITY-ST-ZIP THORNHILL, ONTARIO L4J 2I5

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **TORONTO, ONTARIO M5M 4G1**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP **THORNHILL, ONTARIO L4J 2T5**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARRY G. GOLDLIST

MAR 31/04 (416)

Date

Daytime Phone #