2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 680688

Entity Name: DURAVEST, INC.

FILED Jun 22, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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37 PRINCE ARTHUR AVE, 101 NORTH WACKER DRIVE SUITE 300 2006
TORONTO, ON M5R 1B2 CHICAGO, IL 606061913 US

Current Mailing Address: New Mailing Address:

1543 BAYVIEW AVENUE 101 NORTH WACKER DRIVE SUITE 409 2006
TORONTO, ON M4G 3B5 CHICAGO, IL 606061913 US

FEI Number: 59-2624575 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MCMONIGLE, KEITH
8100 SW 81 DRIVE
STE 210
MIAMI, FL 331436603 US

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: DEBORAH D. SKIPPER 06/22/2006

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition COOKE, PATRICIA L PRES Name: Name: GUREL, OGAN 1543 BAYVIEW AVE STE 409 101 N. WACKER DRIVE, SUITE 2006 Address: Address: City-St-Zip: TORONTO, ONT, CANADA, CN M4G 3B5 City-St-Zip: CHICAGO, IL 606061913 US

Title: Title: (X) Change () Addition () Delete Name: EUSTACE, MICHAEL A Name: GOEBEL, FRIEDRICH W 37 PRINCE ARTHUR AVENUE BRIENNER STRASSE 1, D-80333 Address: Address: TORONTO ONT, CN M5R 1B2 MUNCHEN, GM GERMANY GM City-St-Zip: City-St-Zip:

 $\label{eq:Title:D} {\sf Title:} \qquad \qquad {\sf D} \qquad \qquad (\) \ {\sf Change} \ \ ({\sf X}) \ {\sf Addition}$

Name: Name: CHABURSKY, BORYS

Address: Address: 162 CUMBERLAND STREET, SUITE 310

City-St-Zip: City-St-Zip: TORONTO, ON M5R 3N5 CA

I hereby certify that the information supplied with this filing does not qualify for the 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: OGAN GUREL PD 06/22/2006