2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

836248

1. Entity Name

SIGNATURE:

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FILED May 01, 2003 8:00 am Secretary of State

514.282.1287

Daytime Phone #

05-01-2003 90169 031 ***158.75

0237677	
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DRUMINIC	OND COURT CORPORATION]				
3330 BOHLE	ce of Business STREET DUEBEC H3M 1C7	Mailing Address 1111 LINCOLN ROAD SUITE 400 MIAMI BEACH FL 33139							
Principal Place of Business 3. Mailing Address			· · · · · · · · · · · · · · · · · · ·	(T HEROOF LEVEN THAT BY HE TO THE CONTRACT OF THE	CIAN CORN CIAN GA ``	iis 1 7671 41417 (507		
Suite, Apt	Suite, Apt. #, etc. Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & Star	ty & State City & State				4 50-76070100 1			Applied For	
Zip	Country	Zip Cour		try	5. Ce	ertificate of Status Desired		00.75	
	6Name and Address of Current	Registered Agent		. میشد است	- 7 Na	me and Address of New Regis	tered Agent		
1201 HAY	ATION SERVICE COMPANY 'S STREET SSEE FL 32301			Street Address (F	P.O. Bo oln	ard, Esquire Number is Not Acceptable) Road FOURTH FLOOR			
	11			City			FL Zip C	Code 1 39	
	e named entity submits this statement for tions of registered agent.	the purpose of char	nging its registere	ed office or registere	ed ager	nt, or both, in the State of Florida.			
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable.	(NOTE: Registered	d Agent signature required	when reins	2-3-E	DATE		
Afte	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department of	State				Election Campaign Financi Trust Fund Contribution.		5.00 May Be Ided to Fees	
10.	OFFICERS AND	DIRECTORS	11.		ADD	ITIONS/CHANGES TO OFFICER	IS AND DIRECT	ORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT GODIN, ANDRE 1051 CEDARGLENN GATE, UNIT MISSISSAUGA, ONTARIO L5C 3A		NAME STREE	- 1	*		☐ Chan	ge	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS LEROUX, RENE 507 PLACE D' ARMES, SUITE 13 MONTREAL, QUEBEC H2Y 2W8	□ Dele	NAME STREE)			☐ Chan	ge Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GODIN, JEAN 3330 BOHLE' STREET MONTREAL, QUEBEC H3M-1C7	□ Dele	NAME STREE	1		مود در دراه کام میسیدی در در	☐ Chan	ge 🔲 Addition	
TITLE NAME STREET ADDRESS _CITY-ST=ZIP		☐ Delé	NAME STREE	ľ			☐ Chan	ge 🔲 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Dele	NAME STREE				☐ Chan	ge 🗀 Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Dele	NAME STREE				☐ Chan	ge 🔲 Addition	
indicated	certify that the information supplied with on this report or supplemental report is reporation or the receiver of trustee empo or on an attachment with an address, v	true and accurate an	nd that my signati	ure shall have the s	ame lec	aal effect as if made under oath:	that I am an offi	cer or director 1	

SIGNATURE BE CONTINUED LE SECRETARION DIRECTOR