

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 850904	
1. Entity Name DEVMORE HOLDINGS INC.	

FILED

07 APR 30 AM 7:13

CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 9310 BOUL ST LAURENT SUT 1001 MONTREAL, QUE.	Mailing Address 9310 BOUL ST LAURENT SUT 1001 MONTREAL, QUE.
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04/17/07 90059 019 \$150.00
03262007 No Chg-P CR2E034 (11/05)**DO NOT WRITE IN THIS SPACE**

4. FEI Number 98-0039120	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GREEN, MARVIN M 627-71ST ST MIAMI BEACH, FL 33141

**DO NOT WRITE
IN THIS SPACE**

7. 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 _____ (NOTE: Registered Agent signature required when registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be
Added to Fees.**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STERN, EVELYN 9310 BOUL ST LAUR #1001 MONTREAL, QUEBEC, CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BLUMENTHAL, DEBORAH 9310 BOUL ST. LAURENT #1001 MONREAL, QUEBEC, CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STERN, SEYMOUR 9310 BOUL ST LAUR #1001 MONTREAL, QUEBEC, CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

Evelyn Stern **EVELYN STERN**

APRIL 6/07 (514)387-7171

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

25/1