

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 853760

1. Corporation Name

RICHARD SHAPIRO HOLDINGS LIMITED INC.

Principal Place of Business

561 DUNDAS ST
STE 205
LONDON ON N6B1X
US

Mailing Address

130 WEST FLAGLER ST
2200 MUSEUM TOWER
MIAMI-FL 33130
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 561 Dundas St.

22 City & State

27 Suite 205
28 London, Ontario

23 Zip Country
24 N6B1X1 25 Canada

29 N6B1X1 30 Canada

9. Name and Address of Current Registered Agent

FREITAG, DEAN M.
ONE SE 3RD AVE
28TH FL
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/13/1982

4. FEI Number

98-0036604

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME SHAPIRO, FRANCES
STREET ADDRESS 831 WELLINGTON ST.
CITY-ST-ZIP LONDON, ONT., CAN

TITLE VD
NAME SHAPIRO, MICHELLE
STREET ADDRESS 569 WILLIAM STREET
CITY-ST-ZIP LONDON, ONTARIO CAN

TITLE STD
NAME SHAPIRO, JOEL
STREET ADDRESS 111 DEVONSHIRE AVENUE
CITY-ST-ZIP LONDON ON

TITLE D
NAME MILLS, LORNA
STREET ADDRESS 422 BERKSHIRE DR
CITY-ST-ZIP LONDON, ONTARIO, CAN

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

LORNA MILLS

26th Feb/99 (519) 672-8320

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

0184384

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90138 006 ***150.00

