

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # 853760**

1. Entity Name

**RICHARD SHAPIRO HOLDINGS LIMITED INC.**

Principal Place of Business

Mailing Address

561 DUNDAS ST  
STE 205  
LONDON ON N6-81X1  
CA561 DUNDAS ST  
SUITE 205  
LONDON ON N6  
CA

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**98-0036604**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD  
NAME SHAPIRO, FRANCES  
STREET ADDRESS 831 WELLINGTON ST.  
CITY-ST-ZIP LONDON, ONT., CAN ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE VD  
NAME SHAPIRO, MICHELLE  
STREET ADDRESS 569 WILLIAM STREET  
CITY-ST-ZIP LONDON, ONTARIO CAN ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE STD  
NAME SHAPIRO, JOEL  
STREET ADDRESS 111 DEVONSHIRE AVENUE  
CITY-ST-ZIP LONDON ON ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE D  
NAME MILLS, LORNA  
STREET ADDRESS 422 BERKSHIRE DR  
CITY-ST-ZIP LONDON, ONTARIO, CAN ☐ DeleteTITLE  
NAME  
STREET ADDRESS 76-904 Baseline Road West  
CITY-ST-ZIP London, Ontario Canada N6J 4X6 ☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **LORNA MILLS**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

19th Jan/2000 (519) 672-8320

Date

Daytime Phone #

**FILED**  
**Feb 07, 2000 8:00 am**  
**Secretary of State**

02-07-2000 90018 039 \*\*\*150.00

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DO NOT WRITE IN THIS SPACE