

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

02 JUL -1 PM 2:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

80125018

DOCUMENT # F00000001650
1. Entity Name
HERITAGE SALMON, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 22 ST. CLAIR AVE. EAST Suite, Apt. #, etc. SUITE 1901 City & State TORONTO, ONTARIO		3. Mailing Address 22 ST. CLAIR AVE EAST Suite, Apt. #, etc. SUITE 1901 City & State TORONTO, ONTARIO	
Zip M4T 2S7	Country CANADA	Zip M4T 2S7	Country CANADA

4. FEI Number
01-0462580

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

Applied For
 Not Applicable

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7. Name and Address of Current Registered Agent

Name
CT CORPORATION SYSTEM
Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD
City
PLANTATION FL Zip Code
33324

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 _____ DATE _____
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when substituting)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1, May 1 Fee is \$150.00
After May 1 Fee is \$350.00
Amended UBR is \$61.25
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			
TITLE P	NAME WALSH, FRAZER J.	STREET ADDRESS 669 MAIN ST., BLACKS HARBOUR	CITY-ST-ZIP NEW BRUNSWICK, CANADA
TITLE VS	NAME GREEN, STEWART E.	STREET ADDRESS 2001 22 ST. CLAIR AVE. EAST	CITY-ST-ZIP TORONTO, ONTARIO CANADA
TITLE V	NAME HIRTLE, KENNETH D.	STREET ADDRESS 2 KING ST., SAINT JOHN	CITY-ST-ZIP NEW BRUNSWICK, CANADA
TITLE V	NAME MAVRINAC, RICHARD P.	STREET ADDRESS 1500 22 ST. CLAIR AVE. EAST	CITY-ST-ZIP TORONTO, ONTARIO, CANADA
TITLE V	NAME SMITH, STEPHEN A.	STREET ADDRESS 1500 22 ST. CLAIR AVE. EAST	CITY-ST-ZIP TORONTO, ONTARIO, CANADA
TITLE V	NAME BALCOM, ROBERT A.	STREET ADDRESS 1500 22 ST. CLAIR AVE. EAST	CITY-ST-ZIP TORONTO, ONTARIO, CANADA

DO NOT WRITE IN THIS SPACE

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 on an attachment with an address, with all other like empowered.

SIGNATURE:  MARIAN M. BURROWS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAY 31, 2002
Date

416-922-2500 X5243
Display Phone #

CR2E034B (12/01)