


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 01, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # F01000003818**  
 1. Entity Name  
**STTAS CANADA CORP.**



Principal Place of Business 5200 BLUE LAGOON DRIVE SUITE 600 MIAMI, FL 33126	Mailing Address 5200 BLUE LAGOON DRIVE SUITE 600 MIAMI, FL 33126
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04242006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
 ROSENBERG, LEONARD L ESQ.  
 5200 BLUE LAGOON DRIVE  
 SUITE 600  
 MIAMI, FL 33126

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE 05/12/06  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

000000548241  
 05/12/06 80055-026 150.00

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

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

000000548241  
 05/12/06 80055-026 150.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROSENBERG, LEONARD L 5200 BLUE LAGOON DRIVE MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THOMAS, THOMAS G 5200 BLUE LAGOON DRIVE MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANDLER, GILBERT LEE 5200 BLUE LAGOON DRIVE MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE 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 full power thereto.

SIGNATURE: Leonard L. Rosenberg Date 4/25/06 Daytime Phone # 305 267-9200  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR