

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000001292

Entity Name: KOLTER CITY PLAZA II INC.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

2200 YONGE STREET, SUITE 1600
TORONTO ONTARIO
CANADA, M4S XX

Current Mailing Address:

2200 YONGE STREET, SUITE 1600
TORONTO ONTARIO
CANADA M4S-C6, XX

FEI Number: 98-0368087

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

New Principal Place of Business:

2200 YONGE STREET
SUITE 1600
TORONTO, ON M4S 2C6 CA

New Mailing Address:

2200 YONGE STREET
SUITE 1600
TORONTO, ON M4S 2C6 CA

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JULIEN, ROBERT
Address: 2200 YONGE STREET, SUITE 1600
City-St-Zip: TORONTO, ONT., CANADA,

Title: DCFO () Delete
Name: CLARKE, MICHAEL
Address: 2200 YONGE STREET, SUITE 1600
City-St-Zip: TORONTO, ONT., CANADA,

Title: V () Delete
Name: MOOG, DELIA
Address: 2200 YONGE STREET, SUITE 1600
City-St-Zip: TORONTO, ONT., CANADA,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JULIEN, ROBERT
Address: 2200 YONGE STREET, SUITE 1600
City-St-Zip: TORONTO, ON M4S 2C6 CA

Title: DCFO (X) Change () Addition
Name: CLARKE, MICHAEL
Address: 2200 YONGE STREET, SUITE 1600
City-St-Zip: TORONTO, ON M4S 2C6 CA

Title: V (X) Change () Addition
Name: MOOG, DELIA
Address: 2200 YONGE STREET, SUITE 1600
City-St-Zip: TORONTO, ON M4S 2C6 CA

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL CLARKE

CFO

04/18/2005

Electronic Signature of Signing Officer or Director

_____ Date