#### 2005 FOR PROFIT CORPORATION ANNUAL REPORT

#### Sep 09, 2005 8:00 am Secretary of State 09-09-2005 90033 034 \*\*\*558.75 **DOCUMENT # F03000000366** RAND IMAGINIT TECHNOLOGIES, INC. 50066115 Principal Place of Business Mailing Address **5285 SOLAR DRIVE** 1801 WEST COLUNIAL DR. LHW SBB MISSISSAUGA, ONT CANADA, ORLANDO, FL. 3,2804 3. Mailing Address 8001 SWEETVALEY 5785 SOLAR Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-P 08172005 CR2E034 (10/03) City & State AUBY VIEW N. & State 4. FEI Number Applied For 98-0383971 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FL 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 7, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DP Change Addition TITLE Delete TITLE BALDESARRA, FRANK NAME NAME STREET ADDRESS 1170 DERRY ROAD WEST STREET ADDRESS CITY-ST-ZIP MISSISSAUGA, ONT CANADA, CITY-ST-ZIP TITLE DVP Delete TITLE Addition SEMKIW, BRIAN NAME NAME 94 BEZ AIR DRIVE 2020 LAKESHORE BLVD WEST . STREET ADDRESS STREET ADDRESS OAKVILLE ONT CANADA L6J1M3; CITY-ST-ZIP CITY-ST-ZIP OHCUILLE ONTHRIO CH-404 DST TITLE ☐ Delete TITLE SEMKIW, DENNIS NAME NAME STREET ADDRESS 4110 MOLLY AVENUE STREET ADDRESS CITY-ST-782 MISSISSAUGA, ONT CANDA, CITY-ST-7IP THIE CEO Delete CFO Addition TITLE KRISS BUSH MALHINHA, RUI NAME 1319 GREENEVILLE PRIVE STREET ADDRESS 44 PARKSHORE PLACE STREET ADDRESS DAKINUE, ONTHOLO, CANADA CITY-ST-ZIP CARLISLE ONT CANADA LOR1H1, Lom ans CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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, approvered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the re changed, or on an attaching other like empowered. SIGNATURE: TURE AND TYPER OR POINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

### **ATTACHMENT**

## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

1. Entity Nar	MENT # F03000000								
1801 N ORLA 3280	WEST CELOPIAL DR. NOO, FL.	Mailing Address 5285 SOLAR DRIVE MISSISSAUGA, ONT CANA	ADA, Le(w	/ ઽક્કરુ		500	)60	011	5
	Placè of Business SWIRTVILLY DRIVE . #, etc.	3. Mailing Address 5) Es Solar Suite, Apt. #, etc.	Deve	<del>r</del>	08172005	Chg-P	CR2E	034 (10/03)	
VALEY	View OMIO	Ciff & State  N(15515557067		R10	4. FEI Numb 98-038	-			pplied For ot Applicable
Zip	175 Country V.S.A.	21p 588	CAN AC	4		of Status Desired		\$8.75 Add	
6. Name and Address of Current Registered Agent Name					7. Name and	Address of New	Hegistered	Agent	
1200 SOU	PORATION SYSTEM ITH PINE ISLAND ROAD ION, FL 33324		Street	Address (F	P.O. Box Numb	er is Not Acceptal	ble)		
			City				FL	Zip Cod	le
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 Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) OATE									
FILE NOW!!! FEE IS \$550.00  9. Election Campaign Financing \$5.00 May Be Due by September 7, 2005  9. Election Campaign Financing Added to Fees									
10.	OFFICERS AND D	IRECTORS	11.		ADDITIONS/	CHANGES TO OF	FICERS AND	DIRECTOR:	S IN 11
TITLE NAME	DP BALDESARRA, FRANK	☐ Delete	TITLE NAME					Change	☐ Addition
STREET ADDRESS	1170 DERRY ROAD WEST		STREET ADDRESS						
CITY-ST-ZIP	MISSISSAUGA, ONT CANADA, DVP	□ N.I	CITY-ST-ZIP	<del> </del>			Lifth	) IH	- Addition
TITLE NAME	SEMKIW, BRIAN	☐ Delete	NAME					□ Crange	☐ Addition
STREET ADDRESS CITY-ST-ZIP	2020 LAKESHORE BLVD WEST OAKVILLE ONT CANADA L6J1M3		STREET ADDRESS CITY-ST-ZIP	94	BEZ ALL	- 13		165.	7014
TITLE	DST	Defete	TITLE	UAR	VILLE, Dr	Thele, et	<u>~ 404</u>	Change	Addition
NAME Street Address	SEMKIW, DENNIS 4110 MOLLY AVENUE		NAME STREET ADDRESS						
CITY-ST-ZIP	MISSISSAUGA, ONT CANDA,		CITY-ST-ZIP	]			1	421E2	
TITLE	CFO MALHINHA, RUI	Defete	TITLE NAME	CFO	s Bush			Change	(I Addition
NAME STREET ADDRESS	44 PARKSHORE PLACE		STREET ADDRESS	1319	GREENE	HRIO, CAN	ive	1 / 1	
CITY-ST-ZIP TITLE	CARLISLE ONT CANADA LOR1H	Defete	CTTY-ST-ZIP	O)(C)	DC, are t	maro, Ono	י אנואר	L6M 3 ☐ Change	Addition
NAME Street address :			NAME STREET ADDRESS						1
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE NAME		☐ Detete	TITLE NAME					☐ Change	Addition
STREET ADDRESS			STREET ADORESS						
CITY-ST-ZIP	and the state of t	in filling door not purelify for the	CITY-ST-ZIP	tadic Car	tion 110 07/0\"	\ Florido Ctatado	16	ala , al	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with a other like empowered.									
SIGNATURE: SIGNATURE AND TYPER OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 9/1/65 905-625-2000  Dayuring Phone 9									

**ATTACHMENT** 

# F03000000366

905-625-2000 905-625-2000 905-625-2000

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SCHEDULE "A"

**SAND IMAGINIT TECHNOLOGIES, INC.** 

PFICERS AND DIRECTORS OF RAND IMAGINIT TECHNOLOGIES INC AS AT MARCH 31<sup>ST</sup>, 2005;

OFFICERS

TITLE	NAME	ADDRESS	CILIX	PROVINCE	POSTAL	COUNTRY	TELEPHONE
PRESIDENT FRA	FRANK BALDESARRA	1170 DERRY ROAD	MISSISSAUGA	ONTARIO	L4W 1A1	CANADA	905-625-2000
VICE PRESIDENT BRI	BRIAN SEMKIW	94 BEL AIR DRIVE	OAKVILLE	ONTARIO	L6J 7N1	CANADA	905-625-2000
SECRETARY/TRESURER	C DENNIS SEMKIW	4110 MOLLY AVENUE	Æ		L4Z 1EZ	CANADA	905-625-2000
CHIEF FINANCIAL OFFICER **KRISS BUSH	SS BUSH	1319 GREENEAGLE DRIVE	OAKVILLE	ONTARIO	L6M 2N1	CANADA	905-625-2000

DIRECTORS:

L4W 1A1	L6J 7N1	L4Z 1EZ
ONTARIO	ONTARIO	ONTARIO
MISSISSAUGA	OAKVILLE	MISSISSAUGA
1170 DERRY ROAD	94 BEL AIR DRIVE	4110 MOLLY AVENUE
FRANK BALDESARRA	<b>BRIAN SEMKIW</b>	DENNIS SEMKIW

Business Address for the above officers and directors is as follows:

/o RAND Worldwide 1285 Solar Drive Aississauga, ON 14W 5B8

# Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "RAND IMAGINIT TECHNOLOGIES, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF JUNE, A.D. 2005.



Varuet Smith Hinden

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3932287

DATE: 06-07-05

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