

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003153

FILED
Mar 10, 2005
Secretary of State

Entity Name: EMPLOYMENT MANAGEMENT PROFESSIONALS INC.

Current Principal Place of Business:

470 DOVERCOURT ROAD
TORONTO ONTARIO CANADA,

New Principal Place of Business:

470 DOVERCOURT ROAD
TORONTO
ONTARIO CANADA M6H 2W4, XX XX

Current Mailing Address:

470 DOVERCOURT ROAD
TORONTO ONTARIO CANADA,

New Mailing Address:

470 DOVERCOURT ROAD
TORONTO
ONTARIO CANADA M6H 2W4, XX XX

FEI Number: 98-0431528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENNEY, CHIP
2133 BROADWATER DRIVE
JACKSONVILLE, FL 32225 US

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: PC () Delete
Name: ANDERSON, ALLEN
Address: 470 DOVERCOURT ROAD
City-St-Zip: TORONTO ONTARIO CANADA,

Title: VPVC () Delete
Name: SANTOS, WILLIAM
Address: 2624 CASTLE HILL CRES
City-St-Zip: OAKVILLE ONT. CANADA,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PC (X) Change () Addition
Name: ANDERSON, ALLEN
Address: 470 DOVERCOURT ROAD
City-St-Zip: TORONTO ONT CANADA M6H2W4, XX XX

Title: VPVC (X) Change () Addition
Name: SANTOS, WILLIAM
Address: 2624 CASTLE HILL CRES
City-St-Zip: OAKVILLE ONT. CANADA L6H6J1, XX XX

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: ALLEN ANDERSON

PRES

03/10/2005

_____ Electronic Signature of Signing Officer or Director

_____ Date