

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000003370

**FILED**  
**Jan 13, 2010**  
**Secretary of State**

**Entity Name:** GASTOPS INC.

**Current Principal Place of Business:**

4900 BAYOU BLVD.  
107  
PENSACOLA, FL 325032543 US

**New Principal Place of Business:**

**Current Mailing Address:**

1011 POLYTEK STREET  
OTTAWA, ON K1J9J3 CA

**New Mailing Address:**

**FEI Number:** 98-0426238      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HRAWG CORP.  
1801 N. MILITARY TRAIL, STE. 200  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLANDROAD  
PLANTATION, FL 33324 US

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: CT CORPORATION SYSTEM      01/13/2010  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PVP  
Name: MUIR, DAVE  
Address: 1011 POLYTEK ST  
City-St-Zip: OTTAWA, ON K1J 9J3 CA

Title: PVP  
Name: MOSS, RACHEL  
Address: 4900 BAYOU BLVD., SUITE 107  
City-St-Zip: PENSACOLA, FL 325032543 US

Title: CFO  
Name: LAWLESS, NANCY C.A.  
Address: 1011 POLYTEK ST  
City-St-Zip: OTTAWA, ON K1J 9J3 CA

I hereby 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 all other like empowered.

SIGNATURE: NANCY LAWLESS      CFO      01/13/2010  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date