## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F04000004924

Entity Name: LAUDERHILL G.P., INC.

**FILED** Apr 26, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

370 KING STREET WEST, SUITE 500 370 KING STREET WEST, SUITE 500 TORONTO, ONTARIO TORONTO, ONTARIO

CANADA M54 1J9, CANADA M54 1J9, ON CANADA

New Mailing Address: **Current Mailing Address:** 

370 KING STREET WEST, SUITE 500 370 KING STREET WEST, SUITE 500 TORONTO, ONTARIO TORONTO, ONTARIO CANADA M54 1J9, CANADA M54 1J9, ON CANADA

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

CFRA, LLC CORPORATE CENTER THREE AT INTL. PLAZA 4221 W. BOY SCOUT BLVD. TAMPA, FL 33607 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:

Name:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

PAPPO, LIS PAPPO, LIS Name: Name:

1448 LAWRENCE AVE. EAST, SUITE 305 1448 LAWRENCE AVE. EAST, SUITE 305 Address: Address: City-St-Zip: NORTH YORK, ONT., CANADA, City-St-Zip: NORTH YORK, ONT., CANADA, ON CANADA

( ) Delete SCD Title: Title: (X) Change ( ) Addition

Name: TAMARI, MOSHE Name: TAMARI, MOSHE

370 KING STREET WEST, SUITE 500 370 KING STREET WEST, SUITE 500 Address: Address: TORONTO, ONT., CANADA, TORONTO, ONT., CANADA, ON CANADA City-St-Zip: City-St-Zip:

Title: Title: () Delete () Change () Addition

WEINTRAUB, SAMUEL Name: 7760 WEST 20TH AVENUE, SUITE 1 Address: Address: City-St-Zip: HIALEAH, FL 33106 City-St-Zip:

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: MOSHE TAMARI **PRES** 04/26/2005