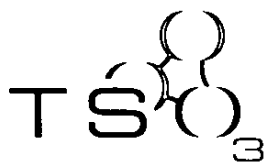


FILED
Jun 15, 2006 8:00 am
Secretary of State

05-04-2006 90228 050 ***150.00

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F05000006937		
1. Entity Name TSO3 INC.		
Principal Place of Business 2505 AV. DALTON SAINTE-FOY, QUEBEC GIP 365,		Mailing Address 2505 AV. DALTON SAINTE-FOY, QUEBEC GIP 365,
DO NOT WRITE IN THIS SPACE		
		02132006 No Chg-P CR2E034 (11/05)
4. FEI Number 98-0390335		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		DO NOT WRITE IN THIS SPACE
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 state if applicable. (NOTE: Registered Agent signature required when reinstating) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C CARRIERE, GERMAIN 168 AV. PORTLAND, VILLE MONT-ROYAL, QUEBEC. H3R 1V1	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VEZINA, JOCELYN 20, CHEMIN DE L'ERMITAGE LAC BEAUPORT, QUEBEC G0A 2C0,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSO ROBITAILLE, SIMON 7417 DU COLIBRI, CHARNY, QUEBEC G6X 3L1,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOISJOLI, MARC 219, DES GRANITES, LAC BEAUPORT, QUEBEC G0A 2C0,	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 all other like empowered.		
SIGNATURE: <u>Marc Boisholi</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date <u>2006/06/13</u> Daytime Phone # <u>418 651 0003</u>



ATTACHMENT

ATTACHMENT

66019045

June 13, 2006

Division of Corporations,
P.O. Box 1500
Tallahassee, Florida 32302-1500

Subject: TSO3 Inc. – reference number: F05000006937

Gentlemen:

As requested in your letter dated May 24, 2006, please find enclosed duly signed the annual report/uniform business report.

Yours truly,

A handwritten signature in cursive script, appearing to read 'M. Boisjoli'.

Marc Boisjoli
CFO

Encl.

/oa