# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 24, 2008**
**Secretary of State**

DOCUMENT# F06000000128

**Entity Name:** 1492385 ONTARIO INC.

**Current Principal Place of Business:**

1 BEACH DR SE
SUITE 220
ST PETERSBURG, FL 33701

**New Principal Place of Business:**

**Current Mailing Address:**

1 BEACH DR SE
SUITE 220
ST PETERSBURG, FL 33701

**New Mailing Address:**

**FEI Number: 98-0478748** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

ROBERGE, THOMAS C CPA
1 BEACH DR SE
SUITE 220
ST PETERSBURG, FL 33701 US

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

POSKUS, SUSAN I CPA
1 BEACH DR SE
SUITE 220
ST PETERSBURG, FL 33701 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: SUSAN I POSKUS, CPA 04/24/2008
Electronic Signature of Registered Agent Date

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

**OFFICERS AND DIRECTORS:**

Title: CDPT ( ) Delete
Name: MILLER, RALPH
Address: % 1 BEACH DRIVE SE, SUITE 220
City-St-Zip: ST PETERSBURG, FL 33701

Title: VCVP ( ) Delete
Name: MILLER, MATTHEW
Address: % 1 BEACH DRIVE SE, SUITE 220
City-St-Zip: ST PETERSBURG, FL 33701

Title: DS ( ) Delete
Name: MILLER, MATTHER
Address: % 1 BEACH DRIVE SE, SUITE 220
City-St-Zip: ST PETERSBURG, FL 33701

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RALPH MILLER CDPT 04/24/2008
Electronic Signature of Signing Officer or Director Date