


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 31, 2008 08:00 A
Secretary of State

DOCUMENT # F06000004108		
1. Entity Name ASTUTE FINANCIAL CORPORATION		
Principal Place of Business 3 STRATHEARN ROAD TORONTO, ONT. CANADA M6C 1R2, OC	Mailing Address 3 STRATHEARN ROAD TORONTO, ONT. CANADA M6C 1R2, OC	



03182008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 98-0117994	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent LOCKHART, STEVE 826 FIRST STREET SOUTH WINTER HAVEN, FL 33880	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
-------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KERR, DONALD W 3 STRATHEARN ROAD TORONTO, ONT. CANADA M6C 1R2,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KERR, MARY L 3 STRATHEARN ROAD TORONTO, ONT. CANADA M6C 1R2,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KERR, JEFFREY 140 STRATHEARN ROAD TORONTO, ONT. CANADA M6C 1R9,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000873124
04/10/08-80067-007-150.00

**DO NOT WRITE
IN THIS SPACE**

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:  **DONALD W. KERR** **MAR 20/08** **416-781-7100**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #