## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000006218

Entity Name: ASTENJOHNSON, INC. CANADA

FILED Apr 13, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	DSON ROAD ON K2K 1X2	CA			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	DSON ROAD ON K2K 1X2	CA			
FEI Number:	98-0383106	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
1200 SOUT	ORATION SYS TH PINE ISLAN DN, FL 33324				
The above in the State		ubmits this statement for the pur	pose of changing its register	ed office or registered agent, or both,	
SIGNATUR	:E:				
	Electroni	c Signature of Registered Agent	•	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS	AND DIRECT	ORS:	ADDITIONS/CHANG	SES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	CASD () CLARK, RICHAR 48 RICHARDSO KANATA,, ON K	N ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () CAPPELL, DANI 4399 CORPORA CHARLESTON,	ATE ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP () JACKSON, GRA 48 RICHARDSO KANATA, ON K2	N RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CFO () MEEK, DAVID 4399 CORPORA CHARLESTON,		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	S () GIBSON, JAMES 4399 CORPORA CHARLESTON, S	ATE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () SZYMANOWSKI 4399 CORPORA CHARLESTON,	TE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: BRENDA SZYMANOWSKI

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04/13/2009

Electronic Signature of Signing Officer or Director

Date