

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000000860

FILED  
Apr 24, 2012  
Secretary of State

Entity Name: R.J. ISAACS INVESTMENTS LIMITED, INC.

## Current Principal Place of Business:

419 THE KINGSWAY  
TORONTO ONTARIO CANADA, M9A 3W1 XX

## New Principal Place of Business:

419 THE KINGSWAY  
ETOBICOKE, ON M9A 3W1 CA

## Current Mailing Address:

419 THE KINGSWAY  
TORONTO ONTARIO CANADA, M9A 3W1 XX

## New Mailing Address:

419 THE KINGSWAY  
ETOBICOKE, ON M9A 3W1 CA

FEI Number: 27-5485527

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FARRELLY, GREGORY G  
506 LOUISA ST  
KEY WEST, FL 330403106 US

## Name and Address of New Registered Agent:

FARRELLY, GREGORY G  
C/O CATALFOMO & FARRELLY  
506 LOUISA ST  
KEY WEST, FL 330403106 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: GREGORY G FARRELLY

04/24/2012

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: CP  
Name: LUDWIG, JUDY I  
Address: 419 THE KINGSWAY  
City-St-Zip: ETOBICOKE, ON M9A 3W1 CA

Title: VCP  
Name: MURRAY, RALPH  
Address: 221 MOUNTAINVIEW RD N  
City-St-Zip: GEORGETOWN, ON L7G 4T8 CA

Title: S  
Name: LUDWIG, JENNIFER  
Address: 419 THE KINGSWAY  
City-St-Zip: ETOBICOKE, ON M9A 3W1 CA

Title: T  
Name: LUDWIG, ELANA  
Address: 419 THE KINGSWAY  
City-St-Zip: ETOBICOKE, ON M9A 3W1 CA

I hereby 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 all other like empowered.

SIGNATURE: JUDY I LUDWIG

P

04/24/2012

Electronic Signature of Signing Officer or Director

Date