FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998

ij



FLORIDA DEPARTMENT OF STATE

FILED

Mar 30 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9200000104 (1)

NESBITT BURNS SECURITIES INC.

Principal Place of Business Mailing Address 115 S LASALLE STREET 115 S LASALLE STREET FLOOR 20 W FLOOR 20 W CHICAGO IL 60603-4003 CHICAGO IL 60603-4003 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/04/1992 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 13-2620737 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. ☐ Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE Change STECK, BRIAN J 1.2 NAME NAME 28 COSMIC DRIVE STREET ADDRESS 1.3 STREET ADORESS DON MILLS, ONTARIO, CANADA CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE BAILLIE, AUBREY W NAME 2.2 NAME 17 MILDENHALL ROAD STREET ADDRESS 2.3 STREET ADDRESS TORONTO, ONTARIO, CANADA CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 THILE TITLE HARTLEY, DAVID NAME 3.2 NAME 100 E BELLEVUE PL STREET ADDRESS 3.3 STREET ADDRESS CHICAGO IL 3 4. CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition IOZZI, ALBERT L NAME 4. 2 NAME 200 CONKLIN ROAD STREET ADDRESS 4.3 STREET ADDRESS **NEWFOUNDLAND NJ 07435** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE DIETRICH, JAY R 5.2 NAME NAME 357 PARK AVE EAST STREET ADDRESS 5.3 STREET ADDRESS HIGHLAND PARK I: CITY-ST-ZIP 5 4 CITY-ST-ZIP TOLE DELETE 61 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 City-St-7iP CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or op an attachment with an address.

SIGNATURE:

STEVE F. PASWSKI 3/6/98 3/2 467-7048