


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 09, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # F93000000567

1. Entity Name  
 118280 CANADA INC.



Principal Place of Business \_\_\_\_\_ Mailing Address \_\_\_\_\_

~~145 ANGEL~~ 6168, Principale  
 STE-CROIX DE LOTBINIERE QUE, CA GOS2H-0

6168 PRINCIPALE  
 CROIX DE LOTBINIERE  
 QUEBEC, CA gos-2ho



01202005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 98-0131693	Applied For - Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRUNTON REGISTERED AGENTS INC.  
 4710 NW BOCA RATON BLVD., #101  
 BOCA RATON, FL 33431

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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 \_\_\_\_\_ DATE \_\_\_\_\_

Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent Signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCP LAFUAMME, GUY 6168 PRINCIPALE C P 190 STE-CRIOX QUEBEC CANADA, CA gos 2ho
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 02/10/05-80014-008 158.75

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: \_\_\_\_\_ Date: January 19, 2005 Daytime Phone #: 418-924-3291

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR