

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathem
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 APR 26 PM 1:17

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # F93000004499 (0)

1. Corporation Name

MEASUREMENTS INTERNATIONAL, INC.

Principal Place of Business

**955 INDUSTRIAL ROAD
PRESCOTT, ONTARIO K0E 1T0**

Mailing Address

**955 INDUSTRIAL ROAD
PRESCOTT, ONTARIO K0E 1T0**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/06/1983

3a. Date of Last Report

03/10/1994

4. FEI Number

93-1060823

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 RR#3, Pirelli Drive

2a. Mailing Address

26 P.O. Box 2359

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Prescott, Ontario

28

Zip

Country

Zip

Country

24 K0E 1T0

25 CANADA

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEMS
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE CP
NAME BROWN, DUANE
STREET ADDRESS 955 INDUSTRIAL ROAD
CITY-ST-ZIP PRESCOTT, ONTARIO K01 1T0**

1.1 TITLE

☒ Change ☐ Addition

**TITLE D
NAME SECOURS, MAURICE
STREET ADDRESS 955 INDUSTRIAL ROAD
CITY-ST-ZIP PRESCOTT, ONTARIO K01 1T0**

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

RR 3, Pirelli Drive

K0E 1T0

☒ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

RR 3, Pirelli Drive

K0E 1T0

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 on an attachment with an address.

SIGNATURE

Signature AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Duane Brown, President

April 21, 1995

613-925-5934

Date

Daytime Phone #