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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

NAME

STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment with an address

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F9300005637 (4) DOCUMENT #

LHTW PROPERTIES, INC.

1140 WEST PENDER STREET 1140 WEST PENDER STREET **SUITE 1690 SUITE 1680** DO NOT WRITE IN THIS SPACE VANCOUVER, B.C. V6E 4G1 VANCOUVER, B.C. V6E 4G1 3. Date Incorporated or Qualified 12/13/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 98-0137391 Not Applicable 21 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 Trust Fund Contribution Added to Fees 23 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 Zio Code 11. Pur suant 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** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PD DELETE Change Addition 11 TITLE TITLE GAINES, PATRICK NAME 1.2 NAME P.O. BOX 21018 644 HORNBY ST. STREET ADORESS 1.3 STREET ADDRESS NORTH VANCOUVER, B.C. CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE **EXALEKIN, DON** 2.2 NAME NAME F.O. BOX 37059, 2930 LONSDALE AVE. STREET ADDRESS 2.3 STREET ADDRESS IN. VANCOUVER, B.C. 2. 4 CITY - ST- ZIP CITY-ST-ZIP DELETE ■ Addition TITLE 3.1 TITLE MOSHER, CAROLYN Mosher, Carolyn 3.2 NAME NAME 301 - 3960 E. HASTINGS ST. 1155 Ronayne Rd. STREET ADDRESS 3.3 STREET ADDRESS RURNABY, B.C. CITY-ST-ZIP 3.4. CITY-ST-ZIP N. Vancouver, BC X DELETE X Addition TITLE 4.1 TITLE GILLEY, MICHAEL NAME 4. 2 NAME Ogilvie, Wendy 4981 LINDEN DR. STREET ADDRESS 4.3 STREET ADDRESS 5375 50th Avenue LADNER, B.C. CITY-ST-ZIP 44 CITY-ST-ZIP Ladner, BC DELETE Change Addition 51 TITLE TITLE NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

FILED Jan 30 1998 8:00am Secretary of State



14. I hereby certify that the information supplied with this filing 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