FILED

FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

	A contract of the contract of							L.			
DOCUMENT # F94000000250 1. Entity Name						04 JUN 23 PM 2:50					
CGI INFORMATION SYSTEMS & MANAGEMENT CONSULTANTS, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA						
Birman	DO NOT WRITE	IN THIS SE	ACE		A.			~ p 1 4 _m ¹	JNIVA		
2. Principal P	lace of Business	3. Mailing Address			Ϊ						
600 Federal Street		1170 Peel St			_						
Suite, Apt. #, etc.		Suite, Apt. #, etc. 5th Floor			DO NOT WRITE IN THIS SPACE						
City & State Andover, MA		City & State Montreal, Qc, H3B 4S8			4. FEI	. FEI Number 04-2925735			Applied Fo		
Zip 01810	Country	Zip	Country Canada		5. Ce	rtificate of Status Desire		\$8.75 Fee Req	Additional uired		
The state of the s						7. Name and Address of Current Registered Agent					
DO NOT WRITE Name Corpo Street Address (F						oration Service Company					
1 1979 - 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Number is Not Accepta										
IN THIS SPACE											
	IN THIS SE	AUC	1201	Hays	Str	eet				ł	
City m_11_h						Zip Code					
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											
	rnamed emity submits tris statement for tions of registered agent.	the pulpose of changing its	tedistaten nurce o	я гедізтен	පට අධ්යා	t, or both, in the state of	Florida. 1 ani 6	SITHINGS W	MII, GIRO BCC	eb:	
)	
SIGNATURE											
Signature: typed or printed mans of impresent eigent and the if applicable. (NOTE: Rygistered Agent agniture required when remarking) (DATE)								 -			
January 1- May 1- Fee Is \$150.00 After May 1- Fee Is \$550.00 Amended UBR Is \$61.25 Make Check Payable to Fiorida Department of State						Election Campaign Financing Trust Fund Contribution. Added to Fees					
10.	OFFICERS AND I	* -n6.888(1.7)	.c. Papil			77 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	1		5 J. 7	113 	
MILE	C/D		TITLE	T				7		1	
NAME	GODIN, Serge		NAME		artista. Kanada in ta	¥* ±		•		į	
STREET ADDRESS	1130 Sherbrooke St.	W.	STREET ADDRESS		A	Tuga (G.) Constitution	4.1	•		16	
CITY-\$1-ZIP	Montreal, Quebec, Ca		CITY ST ZIP	100	jejše viši i i La la vito		+ 1	*.1	·		
THUE	T/D		rm.e	1	1.0			34.		5	
NAME	IMBEAU, André		HAME	1						16	
STREET ADDRESS	1130 Sherbrooke St.	W	STREET ADDRESS				•		e .		
CITY-SI-ZIP	Montreal. Ouebec. Ca	nada H3A 2M8	CITY-ST-ZIP		anal -			10. 11. 	 -	, 	
TITLE	S/D		TILE		L ET		:				
NAME STREET ADDRESS	DORÉ, Paule		NAME STREET ADDRESS	lan:	1 (24) 1 (24)	art.		žw ≒		· :	
CITY-ST ZIP	1130 Sherbrooke St W		CITY-5T-2IP	: Has		DO NOT	ſ WRI	ΤE	54 ALA		
TITLE	Montreal, Quebec, Ca	nada H3A ZM8	IME		394 DRS 340		rest and				
NAME	V ANDERSON, David		NAME	-		INTHIS	SPA	ンヒ	e fall		
STREET ADDRESS	1130 Sherbrooke St.	W.	STREET ADDRESS	Paga is .		** ** ** ** ** ** ** ** ** ** ** ** **		الانتاء الانتاء	le.		
CITY-ST-ZIP	Montreal, Quebec, Ca		CITY-ST-ZIP	h print 1	i. isliffi	turing and second secon		75. - <u>1860 - 18</u>	<u>:</u>		
TITLE	v		1 YILE	e 1		Sec.					
NAME	ROY, Jacques		NAME	1 .		- 500	U38	IA	553		
STREET ADDRESS	1130 Sherbrooke St.		STREET ADDRESS	n la	ţ,						
CITY-ST-ZIP	Montreal, Quebec, Can	ada H3A 2M8	CITY-ST-ZIP	dunken.	UNIO V	<u> 150 m. – 157</u>	1.1 · · ·		·	—-	
TITLE	λC		TITLE "	1 "		mentions seen				, I	

12. Thereby certify that the information supplied with this filing closs not quality for the exemption stated in Section 119.07(3)(i), 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 cath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute libit eport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

CITY-ST-ZP

NAME

STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CHY-ST-ZIP

MASSE, David E.

1130 Sherbrooke St. W

Montreal, Quebec, Canada H3A 2M8

SUNATURE AND THE

June 16, 2004 514-841-3277



ACCOUNT NO. : 07210000032

REFERENCE: 768943

7294105

AUTHORIZATION :

COST LIMIT : \$ 550.00

ORDER DATE: June 22, 2004

ORDER TIME : 9:29 AM

ORDER NO. : 768943-005

CUSTOMER NO: 7294105

CUSTOMER: Ms. Monique Handfield

Mccarthy Tetrault Llp

1170, Rue Peel

Montreal, QC H3B 4S8

ANNUAL REPORT FILING

NAME:

CGI INFORMATION SYSTEMS &

MANAGEMENT CONSULTANTS, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan - Ext. 2955

EXAMINER'S INITIALS: