2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT # F	⁼ 94000000250
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1. Entity Name



FILED Feb 21, 2003 8:00 am Secretary of State 02-21-2003 90143 013 ***150.00

Principal Place of Business 607 FEDERAL STREET 10 \$ MISSOURI AVE OLERWATER R. 13798 3. Mailing Address 10. Suite. Apt. 4, etc. Suite.
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State Country S. Certificate of Status Desired See 75 Additional Respiratory See Required CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301 City FL Zip Code City FL Zip Code City FL Zip Code City FL Zip Code See Required City FL Zip Code See Required City FL Zip Code See Required City FL Zip Code See State Address (P.O. Box Number is Not Acceptable) City FL Zip Code See Required City FL Zip Code Se
City & State Country Country Country S. Certificate of Status Desired See. Fee. Required Fee. Req
Zip Country Zip Country Sip Country Sip Country Sip Country S. Certificate of Status Deaired S8.75 Actitional Fee Required
Se. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301 Street Address (P.O. Box Number is Not Acceptable) City City FL Zip Code City FL Zip Code City FL Zip Code City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) Zip Code Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code Street Address (P.O. Box Number is Not Acceptable) DATE Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable) The Street Address (P.O. Box Number is Not Acceptable)
8: Name and Address of Cürrent Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301 City FL 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 the obligations of registered agent. SIGNATURE FILE NOW!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS IT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TILE CO OOIN, SERGE I130 SHERBROOKE STREET MONTREAL QU HAAZM8 ITTUS TO GARLIER, STEPHANE GOFFICERS AND Belete MAME SIREF ADDRESS ITTUS TO HARD Delete TILE MAME MAM
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301 City FL 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 the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE OD OFFICERS AND DIRECTORS 51 SHEET ADDRESS SIRRET ADDRESS SIRRET ADDRESS SIRRET ADDRESS SIRRET ADDRESS OOF FEDRAL STREET TD DEBET DEBET SIRRET ADDRESS 1130 SHERBROOKE STREET MAMAE SIRRET ADDRESS 1130 SHERBROOKE STREET TD DEBET DEBET SIRRET ADDRESS 1130 SHERBROOKE STREET MONTREAL OU H3A2MB OFFICERS AND 1810 OFFICER
Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
TALLAHASSEE FL 32301 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature Typed or proceed name of registered agent and size it appricable. (NOTE: Registered Agent signature registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS N. 11 TITLE OD, SERGE NAME SIREET ADDRESS AND OVER MA 01810 CITY-51-2P TITLE VP OBJECT ADDRESS SIREET SIREET SIREET ADDRESS SIREET ADDRES
B. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature,
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature: Signature: typed or printed name of registered agent and iste it applicable. (NOTE: Registered Agent egradure required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be Added to Fees Addition Addition
SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS Trust Fund Contribution.
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Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME GODIN, SERGE 1130 SHERBROOKE STREET MONTREAL QU H3A2M8 CITY-ST-ZIP TITLE GOUTHER, STEPHANE GOUTH-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP MONTREAL QU H3A2M8 CITY-ST-ZIP TITLE NAME STREET ADDRESS TREET ADDRESS TREE
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12. 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 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: