

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90195 036 ***150.00

DOCUMENT # F94000001253

1. Entity Name
MFP FINANCIAL SERVICES (OF DELAWARE) INC.



Principal Place of Business
**2281 N. SHERIDAN WAY
MISSISSAUGA ONTARIO L5K 2S3
CA**

Mailing Address
**2281 N. SHERIDAN WAY
MISSISSAUGA ONTARIO L5K 2S3
CA**

2. Principal Place of Business
2281 N. SHERIDAN WAY
Suite, Apt. #, etc.

3. Mailing Address
2281 N. SHERIDAN WAY
Suite, Apt. #, etc.

City & State
MISSISSAUGA, ONTARIO

City & State
MISSISSAUGA, ONTARIO

4. FEI Number
13-3493558

Applied For
Not Applicable

Zip
L5K 2S3

Country
CANADA

Zip
L5K 2S3

Country
CANADA

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD
SUITE 508
MIAMI FL 33156**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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	DP WOLFRAM, J. PETER 2281 N SHERIDAN WAY MISSISSAUGA, ON L5K 2S3	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS MICHAELSON, SUZANNE C 2281 N SHERIDAN WAY MISSISSAUGA, ON L5K 2S3	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WRIGHT, ROBERT 2281 N SHERIDAN WAY MISSISSAUGA, ON L5K 2S3	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V STEVENS, R. BRIAN 2281 N. SHERIDAN WAY MISSISSAUGA, ONTARIO OT L5K- 2S3	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FLANAGAN, MICHAEL A 2281 N SHERIDAN WAY MISSISSAUGA, ON L5K 2S3	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V FINK, JOSEPH B 2281 N. SHERIDAN WAY MISSISSAUGA, ONTARIO ON L5K- 2S3	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRITTON, KAREN J. 2281 N. SHERIDAN WAY MISSISSAUGA, ON L5K 2S3 CANADA	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 *[Signature]* **KAREN J. BRITTON**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 24, 2003

(905) 855-2500

Date

Daytime Phone #

CR2E034 (10/02)