


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

FILED
Mar 24 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F94000001379 (6)**
1. Corporation Name
**WINFAIR HOSPITALITY MANAGEMENT LIMITED CORPORATI
ON**

Principal Place of Business 2085 HURONTARIO ST SUITE 200 MISSISSAUGA, ONTARIO CANADA L5A 4G1	Mailing Address 2085 HURONTARIO ST SUITE 200 MISSISSAUGA, ONTARIO CANADA L5A 4G1
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2085 Hurontario Street Suite, Apt. #, etc. 22 Suite 200 City & State 23 Mississauga, Ontario Zip 24 L5A 4G1		2a. Mailing Address 26 2085 Hurontario Street Suite, Apt. #, etc. 27 Suite 200 City & State 28 Mississauga, Ontario Zip 29 L5A 4G1		3. Date Incorporated or Qualified 03/18/1994	
Country 25 Canada		Country 30 Canada		4. FEI Number NOT APPLICABLE Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent BRENES, SHARLENE 6100 BLUE LAGOON DR SUITE 180 MIAMI FL 33126		10. Name and Address of New Registered Agent 81 Name BRENKUS, Sharlene 82 Street Address (P.O. Box Number is Not Acceptable) 2200 West Commercial Blvd., 83 Suite 309, 84 City Fort Lauderdale FL 85 Zip Code 33309	
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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  **Sharlene Brenkus** March 9, 1998
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE	1.1 TITLE DPS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME YUEN, CLINTON		1.2 NAME YUEN, CLINTON	
STREET ADDRESS 73 WOODRIVER STREET		1.3 STREET ADDRESS 73 Woodriver Street	
CITY-ST-ZIP RICHMOND HILL ON		1.4 CITY-ST-ZIP Richmond Hill, Ontario, Canada	
TITLE P	<input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WHITE, ROGER		2.2 NAME	
STREET ADDRESS 1250 EGLINTON AVE E.		2.3 STREET ADDRESS	
CITY-ST-ZIP NORTH YORK ONTARIO CANADA		2.4 CITY-ST-ZIP	
TITLE SV	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME LAU, KENNETH K		3.2 NAME	
STREET ADDRESS 2085 HURONTARIO ST, SUITE 200		3.3 STREET ADDRESS	
CITY-ST-ZIP MISSISSAUGA ON		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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

Clinton Yuen March 6, 1998

(905) 803-8898

CR2E034 (10/97)