2002 UNIFORM BUSINESS REPORT (UBR)

Aug 19, 2002 8:00 am Secretary of State DOCUMENT # F94000002144 1. Entity Name 08-19-2002 90145 023 ***150.00 VILLABAR PROPERTIES INC. Principal Place of Business Mailing Address **SUITE 1100 SUITE 1100** 30 ST. CLAIR AVENUE WEST 30 ST. CLAIR AVENUE WEST TORONTO ONTARIO M4V 3A1 TORONTO ONTARIO M4V 3A1 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 98-0124041 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEDOLL RONALD MEDOFF, RONALD P.O. Box Number is Not Acceptable) 2550 ALAFAYA TRAIL deawai ORLANDO FL 32826 issimmer 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 agents SIGNATURE gistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 **PVTD** TITLE TITI F ☐ Delete CR2E034 (4/02) ☐ Change Addition HOFFER, MAYER NAME STREET ADDRESS 30 ST. CLAIR AVENUE WEST, SUITE 1100 STREET ADDRESS CITY-ST-ZIF TORONTO ONTARIO M4V 3A1 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME LEWIS, DEBRA NAME STREET ADDRESS 30 ST. CLAIR AVENUE WEST, SUITE 1100 STREET ADDRESS CITY-ST-7IP TORONTO ONTARIO M4V 3A1 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME

13. Thereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with like empowered

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

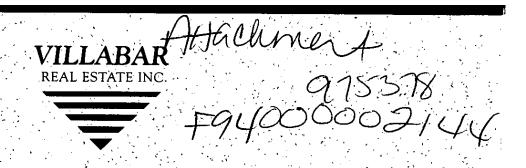
STREET ADDRESS

CITY-ST-ZIP

R PRINTED NAME OF SIGN

Daytime Phone #

FILED



August 9, 2002

Florida Department of State Division of Corporations P.O. Box 1500 Tallahassee, FL 32302-1500

Dear Sirs:

RE: 2002 Uniform Business Report (UBR)

We recently received the 2002 UBR and are enclosing the completed form for filing. The postmark on the report we received from you was dated July, 2002. This was the first notice we received regarding the 2002 UBR. As such, as per your FAQ#8, we are requesting that the late filing penalty be waived. We are enclosing a cheque in the amount of \$150 for this year's fee.

If you have any questions regarding the above, please do not he sitate to contact this office at (416) 972-0458.

Yours truly,

Mayer Hoffer

Encls.