

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000001107

FILED
May 05, 2004
Secretary of State

Entity Name: CINITEL U.S. PROPERTIES, INC.

Current Principal Place of Business:

1090 DON MILLS ROAD, STE 600
DON MILLS, ONTARIO M3C 3R6, CA

New Principal Place of Business:

1090 DON MILLS ROAD, STE 600
DON MILLS,, ON M3C 3R6 CA

Current Mailing Address:

1090 DON MILLS ROAD, STE 600
DON MILLS, ONTARIO M3C 3R6, CA

New Mailing Address:

1090 DON MILLS ROAD, STE 600
DON MILLS, ON M3C 3R6 CA

FEI Number: 98-0115501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLATER, JOEL K
5145 CITY STREET
ORLANDO, FL 32839 US

Name and Address of New Registered Agent:

SKELLEY, JEANNIE
319 NORTH MAGNOLIA AVENUE
ORLANDO, FL 32801 US

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.

SIGNATURE: JEANNIE SKELLEY

05/05/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DC () Delete
Name: MORTON, PAUL
Address: 1090 DON MILLS ROAD, STE 600
City-St-Zip: DON MILLS, ONTARIO M3C 3R6, CA

Title: DP () Delete
Name: MORTON, HENRY
Address: 1090 DON MILLS ROAD, STE 600
City-St-Zip: DON MILLS, ONTARIO M3C 3R6, CA

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC (X) Change () Addition
Name: MORTON, PAUL
Address: 1090 DON MILLS ROAD, STE 600
City-St-Zip: DON MILLS,, ON M3C 3R6 CA

Title: DP (X) Change () Addition
Name: MORTON, HENRY
Address: 1090 DON MILLS ROAD, STE 600
City-St-Zip: DON MILLS,, ON M3C 3R6 CA

Title: VP () Change (X) Addition
Name: ACHESON, JOCELYN
Address: 1090 DON MILLS ROAD STE 600
City-St-Zip: TORONTO, ON M3C 3R6 CA

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOCELYN T. ACHESON

VP

05/05/2004

Electronic Signature of Signing Officer or Director

Date