

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000002568 (2)

1. Corporation Name

GRACEEL PROPERTIES LIMITED CORP.



Principal Place of Business

Mailing Address

110 LLOYD MANOR ROAD
ISLINGTON, ONTARIO
CANADA M9B 5J9

110 LLOYD MANOR ROAD
ISLINGTON, ONTARIO
CANADA M9B 5J9

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

05/26/1995

3a. Date of Last Report

4. FEI Number

98-0120052

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

BRUNTON REGISTERED AGENTS INC.
4710 NW BOCA RATON BLVD., #101
BOCA RATON FL 33431

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PC
NAME LANCASTER, E. E
STREET ADDRESS 110 LLOYD MANOR ROAD, ISLINGTON, ONTARIO
CITY - ST - ZIP CANADA M9B 5J9

☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

1.2 NAME ☐ Change ☐ Addition

TITLE
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CITY - ST - ZIP

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1.3 STREET ADDRESS ☐ Change ☐ Addition

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1.4 CITY - ST - ZIP ☐ Change ☐ Addition

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2.1 TITLE ☐ Change ☐ Addition

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2.5 NAME ☐ Change ☐ Addition

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2.6 STREET ADDRESS ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

2.7 CITY - ST - ZIP ☐ Change ☐ Addition

SIGNATURE: *E.E. Lancaster* E. E. LANCASTER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jan 26/96 416-231-5687

CR2E034 (12/95)