

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F96000004726

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** FOREST NORTH AMERICAN HOLDINGS, INC.

**Current Principal Place of Business:**

209 SOUDAN AVENUE  
TORONTO, ONTARIO, CANADA  
M4S 1W2, ON

**New Principal Place of Business:**

**Current Mailing Address:**

209 SOUDAN AVENUE  
TORONTO, ONTARIO, CANADA  
M4S 1W2, ON

**New Mailing Address:**

**FEI Number:** 98-0113869

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DEVLIN, SUMMER  
1980 NORTH ATLANTIC AVE., STE 128  
COCOA BEACH, FL 32931 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PSD  
**Name:** LEIBEL, ROBIN  
**Address:** 209 SOUDAN AVENUE  
**City-St-Zip:** TORONTO, ON CANADA, ON M4S 1W2

**Title:** D  
**Name:** LEIBEL, ALLAN  
**Address:** 119 LAKE PROMENADE  
**City-St-Zip:** TORONTO, ON CANADA, ON M8W 1A2

**Title:** D  
**Name:** GAVSIE, ROSALIND  
**Address:** 2045 LAKESHORE BLVD W APT-3505  
**City-St-Zip:** TORONTO, ON CANADA, ON M8V 2ZG

I hereby 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 all other like empowered.

**SIGNATURE:** ROBIN LEIBEL

PSD

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date