

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F96000005157**

1. Corporation Name
PPM 2000 INC.

Principal Place of Business
**10803-182 STREET, SUITE 201
EDMONTON ALBERTA T5S 1J5
CANADA**

Mailing Address
**10803-182 STREET, SUITE 201
EDMONTON ALBERTA T5S 1J5
CANADA**

FILED
Jul 19, 1999 8:00 am
Secretary of State

07-19-1999 90010 041 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/04/1996

4. FEI Number

22-3362174

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 owes the current year
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business
21 **10216 - 124 Street**

Suite, Apt. #, etc.

22 **Suite 500**

City & State

23 **Edmonton, Alberta**

Zip

24 **T5N 4A3**

Country

25 **CANADA**

2a. Mailing Address

26 **10216 - 124 Street**

Suite, Apt. #, etc.

27 **Suite 500**

City & State

28 **Edmonton, Alberta**

Zip

29 **T5N 4A3**

Country

30 **Canada**

9. Name and Address of Current Registered Agent

**STANKEVICH, JAMES A
6147 DEL RIO DRIVE
PORT ORANGE FL 32127**

10. Name and Address of New Registered Agent

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

TITLE **POST** ☐ DELETE
NAME **O'SULLIVAN, DENIS**
STREET ADDRESS **10803-182 STREET, SUITE 201, EDMONTON, AB**
CITY-ST-ZIP **CANADA T5S 1J5**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
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CITY-ST-ZIP

TITLE ☐ DELETE
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

Denis A. O'Sullivan, CPP
President & CEO

PPM 2000 Inc.
10216-124 Street, Suite 500
Edmonton, AB, Canada T5N 4A3

Tel 780-448-0616
Fax 780-448-0618

James A. Stankevich, CHPA
Senior Vice-President

PPM 2000 Inc.
P.O. Box 238109
Daytona Beach, FL 32123-8109

Tel 904-788-2539
Fax 904-767-6810

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590535-90010-41



July 7, 1999

Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

To Whom It May Concern:

I spoke with a representative from your office this morning about the *1999 Profit Corporation Annual Report Packet – 2nd Notice* which we just received in the mail.

I explained to her that we did not file our annual report prior to the June 11, 1999 deadline because we never received the original Annual Report Packet – this was most likely due to the packet being addressed to our old location. The representative recommended that we issue a letter explaining our situation along with a cheque for just the annual report and corporation supplemental fee.

Accordingly, please find enclosed a cheque for \$150 payable to the Florida Department of State. I have also completed boxes 2 and 2a on the Annual Report so our current address can be updated in your records.

If you have any questions or concerns, please call me at (780) 448-0616 ext. 4040.

Sincerely,

A handwritten signature in black ink, appearing to be "pm" or "Peter Mah", written in a cursive style.

Peter Mah
Controller