2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT

F96000006578

Mailing Address

920 YONGE ST.

TORONTO, ONTARIO CA M4W -3C7

1. Entity Name

920 YONGE ST.

T.R.L. HOLDINGS, INC.

TORONTO, ONTARIO CA M4W -3C7

Principal Place of Business



FILED Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90245 013 ***150.00

2. Principal	Place of Business	3. Mailing Addres	SS							
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc. City & State			☐ CHECK HERE IF MAKING CHANGES					
				· - ·	4. FEI Number 36-3044546		Applied For Not Applicable			
Zip	Country	Zip	Country	у	5. Certificate of Status Desired		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Name Street Address (P.O. Box Number is Not Acceptable)						
:				City		FL	Zip Code			
	re named entity submits this statem ations of registered agent.	nent for the purpose of chai	nging its registered	d office or req	gistered agent, or both, in the State of Flo	rida. I am	familiar with, and accept			
SIGNATURE										
	Signature, typed or printed name of registere	d agent and title if applicable.	(NOTE: Registered A	Agent signature re	equired when reinstating)	DATE				

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
After	ILE-NOW!!! FEE IS \$150:00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of State			9. Election Campa Trust Fund Cont	ribution.	☐ Added	0 May Be to Fees					
10.	OFFICERS AND DIRECTOR	RS	11.	ADDITIONS/CHANGES T	O OFFICERS AN	ID DIRECTORS	S IN 11					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD COOPER, RICHARD M 920 YONGE ST. TORONTO, ONTARIO CA M4W -3C7	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V COOPER, SYDNEY C 920 YONGE ST. TORONTO, ONTARIO CA M4W -3C7	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition .					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BEKHOR, EDWARD E 920 YONGE ST. TORONTO, ONTARIO CA M4W -3C7	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition					

12. 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

RRICHARD M. COOLEL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR