

**2001 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 19, 2001 8:00 am**  
**Secretary of State**  
 03-19-2001 90009 035 \*\*\*150.00

**DOCUMENT # F97000006935**

1. Entity Name  
**920193 ONTARIO INC.**

Principal Place of Business 1174 ST. JEROME ST. SUDBURY ONTARIO CANANDA P3A -2V9	Mailing Address 1174 ST. JEROME ST. SUDBURY ONTARIO CANANDA P3A -2V9
2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country
	<b>CANADA</b>



DO NOT WRITE IN THIS SPACE

4. FEI Number <b>98-0121748</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Name and Address of Current Registered Agent	
7. Name and Address of New Registered Agent	
CPA ASSOCIATES, P.A. 1301 6TH AVE., W., #600 BRADENTON FL 34205-7440	
Name	Street Address (P.O. Box Number is Not Acceptable)
City	FL Zip Code

8. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2001 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PDC</b> <b>LAFRENIERE, CLEMENT</b> <b>4532 CHENIER</b> <b>HANMER ONTARIO CANANDA P3P -1X5</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>CANADA</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VD</b> <b>LAFRENIERE, MAURICE</b> <b>S PALISADE PLACE</b> <b>SUDBURY ON P3A3X</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>5</b> <b>CANADA P3A3X9</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STDC</b> <b>LAFRENIERE, GERALD</b> <b>2020 JOSEPHINE</b> <b>SUDBURY ONTARIO CANANDA P3A -2M9</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>CANADA P3A2MB</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>LAFRENIERE, BERTHE</b> <b>1205 LONSDALE AVE</b> <b>SUDBURY ONTARIO CANANDA P3B -1K3</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>CANADA</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gerald Lafreniere **GERALD LAFRENIERE** 3/12/2001 (705)560-5599  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)