

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000007019

FILED
Mar 22, 2004
Secretary of State

Entity Name: CANADIAN SYSTEMS, INC.

Current Principal Place of Business:

PO BOX 2603
POMPANO BEACH, FL 33072

New Principal Place of Business:

PO BOX 10125
POMPANO BEACH, FL 33061

Current Mailing Address:

PO BOX 2603
POMPANO BEACH, FL 33072

New Mailing Address:

PO BOX 10125
POMPANO BEACH, FL 33061

FEI Number: 65-0876766

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARDETTE, BRENT J SR
2580 S.E. 7 STREET
POMPANO BEACH, FL 33062 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FARDETTE, BRENT J SR
Address: PO BOX 2603
City-St-Zip: POMPANO BEACH, FL 33072

Title: VST () Delete
Name: FARDETTE, CAROL J
Address: PO BOX 2603
City-St-Zip: POMPANO BEACH, FL 33072

Title: D () Delete
Name: GONZALES, RICHARD B
Address: 2008 SCARLET ROSE DRIVE
City-St-Zip: LAS VEGAS, NV 89134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FARDETTE, BRENT J SR
Address: PO BOX 10125
City-St-Zip: POMPANO BEACH, FL 33072

Title: VST (X) Change () Addition
Name: FARDETTE, CAROL J
Address: PO BOX 10125
City-St-Zip: POMPANO BEACH, FL 33061

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: CAROL J FARDETTE

VST

03/22/2004

Electronic Signature of Signing Officer or Director

Date