

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 16, 2004 08:00 AM
Secretary of State

DOCUMENT # F99000000711 1. Entity Name PARBIRDIE HOLEDINGS INC.					
Principal Place of Business 1858 RINGLING BLVD. SARASOTA, FL 34236			Mailing Address 1858 RINGLING BLVD. SARASOTA, FL 34236		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		01162004 Chg-P CR2E034 (10/03)	
Zip		Country		4. FEI Number 98-0143869	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent NARAVEZ, JANET 1858 RINGLING BLVD. SARASOTA, FL 34236				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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. I am familiar with, and accept the obligations of registered agent.				SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PSD DEEKS, PETER A 8 GLAZEBROOK AVE/TORONTO, ONTARIO CANADA M4P 3H9,	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PSD DEEKS, WENDY R 8 GLAZEBROOK AVE/TORONTO, ONTARIO CANADA M4P 3H9,	☐ Delete			
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PSD DEEKS, WENDY R 8 GLAZEBROOK AVE/TORONTO, ONTARIO CANADA M4P 3H9,	☐ Delete			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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				U000000054070 02/16/04-80157-012 150.00	
SIGNATURE: <i>[Signature]</i>				PRESIDENT	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Day, Time Phone #	