

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000002406

Entity Name: BALCONES GP,INC.

FILED  
Jan 18, 2006  
Secretary of State

## Current Principal Place of Business:

1 PLACE VILLE MARIE, SUITE 3835  
MONTREAL, QUEBEC, CANADA, H3B 4M6

## New Principal Place of Business:

1 PLACE VILLE MARIE, SUITE 3835  
MONTREAL, QUEBEC, CANADA, CD H3B 4M6

## Current Mailing Address:

1 PLACE VILLE MARIE, SUITE 3835  
MONTREAL, QUEBEC, CANADA, H3B 4M6

## New Mailing Address:

101 E. KENNEDY BLVD.  
SUITE 2700  
TAMPA, FL 33602

FEI Number: 59-2465412

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CASTELLANO, NELSON T  
101 E. KENNEDY BOULEVARD  
SUITE 2700  
TAMPA, FL 33602 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: DP ( ) Delete  
Name: SHEINER, LLOYD  
Address: 1 PLACE VILLE MARIE, SUITE 3835  
City-St-Zip: MONTREAL, QUEBEC, CANADA, H3B 4M6

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Chapter 119, 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: LLOYD SHEINER

DP

01/18/2006

Electronic Signature of Signing Officer or Director

Date