

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004341

FILED
Jul 15, 2005
Secretary of State

Entity Name: 348158 ONTARIO LIMITED INC.

Current Principal Place of Business:

8004 WEST GULF BLVD
TREASURE ISLAND, FL 33706 US

New Principal Place of Business:

New Mailing Address:

P. O. BOX 386
ST. PETERSBURG, FL 33731 US

Current Mailing Address:

8004 WEST GULF BLVD
TREASURE ISLAND, FL 33706 US

FEI Number: 98-0176961

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEFABRIZIO, LUIGI V
8004 WEST GULF BLVD
TREASURE ISLAND, FL 33706 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CDP () Delete
Name: DEFABRIZIO, LOU
Address: 8004 WEST GULF BLVD
City-St-Zip: TREASURE ISLAND, FL 33706

Title: VST () Delete
Name: DEFABRIZIO, LOU
Address: 8004 WEST GULF BLVD
City-St-Zip: TREASURE ISLAND, FL 33706

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDP (X) Change () Addition
Name: DEFABRIZIO, LOU
Address: P. O. BOX 386
City-St-Zip: ST. PETERSBURG, FL 33731

Title: VST (X) Change () Addition
Name: DEFABRIZIO, LOU
Address: P. O. BOX 386
City-St-Zip: ST. PETERSBURG, FL 33731

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: LOU DEFABRIZIO

P

07/15/2005

Electronic Signature of Signing Officer or Director

Date