FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G21660

(7)

CANADIAN DEVELOPMENT CORPORATION

Principal Place of Business Mading Address

1711 MCCOWAN RD.STE 207

FILED Jan 29 1997 8:00am Secretary of State



US	1. UNITARIO CARADA MISEL	U\$	DIOPA MIVE!		
	_			3. Date Incorporated or Qualifica 02/04/1983	3a. Date of Last Report 02/12/1996
—	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2353257	Not Applicabl
Suite, Apt.	. #, elc.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
MIS	Country	Zip 2 2 2 2	Country	8. This corporation has liability for	
MIS	Q 13 25		10		Yes No
	9, Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	gistered Agent
RICHARDSON, RALPH A. SUITE 104			81 Name		
			82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)
	5 OLD 41 RD.		-	v. <u></u>	
BON	IRA SPRINGS FL 33959-8779		83		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508. Florida Statutes	L_L s. the above-named cor	rporation submits this statement for the r	purpose of changing its registere
office or I	registered agent, or both, in the State am familiar with, and accept the oblic	o of Florida, Such change was au	thorized by the corpora	rporation submits this statement for the pation's board of directors. I hereby accept	of the appointment as registered
SIGNATURE	antianila with and accept the oblig	gandria or, accitor 667.0303, Flori	ua otatates		
	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE	Rogistered Agent signature requ	in the state of th	DATE
2.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TLE	PD DOON OF COOK D	DELETE	1 1 11T(F		Change Additi
AME	JORDON, GEORGE R.		1.2 NAME		
Treet address	124 MAIN ST.		1.3 STREET ADDRESS		
ITY-ST-ZIP	UNIONVILLE, ONTATIO		1.4 CITY - ST - ZIP		
ITLE	ODDON DAVID	DELETE	2.1 TALE		Change Addition
AME	JORDON, DAVID 125 JOHN ST.		2 2 NAME		
TREET ADDRESS	THORNHILL, ONTARIO	_	2.3 STREET ADDRESS		
TY-ST-ZIP	VOS	DELETE	2 4 CHY-ST-7IP	<u> </u>	Change I Additi
itle Ame	HORCHIK, DANIEL R	► Derese	3 1 11TLE		Change Additi
	8 SCANDIA COURT		32 NAME		
TREET ADDRESS	MARKHAM ONTARIO		3 3 STREET ADDRESS		
ITY-ST-ZIP	THE REST OF STREET	DELETE	3 4. C(TY - \$1 - Z(P)		Change Addition
AME	<u> </u>	F-1 265111	4. 2 NAME		C overâs C Vogen
TREET ADDRESS	İ		4.3 STREET ADDRESS		
ity-st-zip			4.4 CITY - ST - ZIP		
171-81-21r 171E		DELETE	51 HILE		Change Additi
AME		_	5 2 NAME		
TREET ADDRESS			5.3 STREET ADDRESS		
ITY-ST-ZIP	İ		5.4 CITY - ST - ZIP		
ITLE		DELETE	6.1 Till E		Change Addition
iame		_	6.2 NAME		• —
TREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 CITY - S1 - 7IP		
	by certify that the information supplie	ed with this filling does not qualify		ed in Section 119.07(3)(i), Florida Statute	s. I further certify that the

I do neighby certify that the information supplied with this ting does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. Further certify that the information indicated on this amount report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

HUGEORGE LURION

274-92(416) 79/41.NAL