

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H65031 (7)

1. Corporation Name

U.S. URBAN ENTERPRISES, INC.



Principal Place of Business

55 METCALFE STREET #1150
OTTAWA, ONTARIO K1P 6L5
CANADA

Mailing Address

55 METCALFE STREET #1150
OTTAWA, ONTARIO K1P 6L5
CANADA

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

PARKS, LINDA J., KPMG PEAT MARWICK
111 N. ORANGE AVE., SUITE 1600
ORLANDO FL 32801

3. Date Incorporated or Qualified

06/27/1985

3a. Date of Last Report

05/01/1995

4. FEI Number

59-2552441

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81

Name

LINDA PARKS, JAMES, PARKS, BENJAMIN & WATKINS

82

Street Address (P.O. Box Number is Not Acceptable)

7600 MAITLAND CENTER PARKWAY

83

Suite

SUITE 330

84

City

MAITLAND

FL

85

Zip Code

32751

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(Print Name, Title, Address of Signatory and Date of Filing)

6-18-96.

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

VPT

EDIN, OSMAN

207 QUEENS QUAY W. #450

TORONTO, CANADA

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

D

CUHACI, EDWARD J.

55 METCALFE ST. # 1150

OTTAWA ONTARIO, CANA

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

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CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-ST-ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY-ST-ZIP

☐ Change

☐ Addition

☐ Change

☐ Addition

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☐ Addition

☐ Change

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☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

500001877785
-06/27/96--01032--032
***200.00

April 30/96

613-2367135

CR2E034 (12/95)