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Apr 30, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K41230

1. Corporation Name
COSCAN PRESIDENTIAL INC.

Principal Place of Business

20803 BISCAYNE BLVD
103
AVENTURA FL 33180
US

Mailing Address

20803 BISCAYNE BLVD
103
AVENTURA FL 33180
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/20/1988

4. FEI Number

65-0078720

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

g. Name and Address of Current Registered Agent

WOLFE, LEON J ESQ.
100 SE 2ND STREET
35TH FLOOR
MIAMI FL 33131-2130

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME PRINGLE, BILL
STREET ADDRESS 181 BAY STR, STE 4200
CITY-ST-ZIP TORONTO, ONTARIO

TITLE DV ☒ DELETE
NAME CULLINGWORTH, ROSS
STREET ADDRESS 181 BAY STR SUITE 4200
CITY-ST-ZIP TORONTO ON

TITLE V ☒ DELETE
NAME ALPER, SUE
STREET ADDRESS 20803 BISCAYNE BLVD, SUITE 103
CITY-ST-ZIP AVENTURA FL 33180

TITLE V ☐ DELETE
NAME HALL, CHARLES B
STREET ADDRESS 20803 BISCAYNE BLVD., STE. 103
CITY-ST-ZIP AVENTURA FL 33180

TITLE AVAS ☐ DELETE
NAME TACHER, ROBERTA
STREET ADDRESS 20803 BISCAYNE BLVD., STE. 103
CITY-ST-ZIP AVENTURA FL 33180

TITLE V ☐ DELETE
NAME PIAZZA, ALBERT
STREET ADDRESS 20803 BISCAYNE BLVD, SUITE 103
CITY-ST-ZIP AVENTURA FL 33180

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE V, D.S. ☐ Change ☒ Addition
1.2 NAME BURRIS, DAVID
1.3 STREET ADDRESS 20803 BISCAYNE BLVD, SUITE 103
1.4 CITY-ST-ZIP AVENTURA, FL 33180

2.1 TITLE V ☐ Change ☒ Addition
2.2 NAME CABELLERO, ILEANA
2.3 STREET ADDRESS 20803 BISCAYNE BLVD, SUITE 103
2.4 CITY-ST-ZIP AVENTURA, FL 33180

3.1 TITLE D. ☐ Change ☒ Addition
3.2 NAME PETER NESBITT
3.3 STREET ADDRESS 181 BAY ST., SUITE 4300
3.4 CITY-ST-ZIP TORONTO, ONTARIO, CANADA

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE P.D. ☒ Change ☐ Addition
6.2 NAME PIAZZA, ALBERT
6.3 STREET ADDRESS 20803 BISCAYNE BLVD, SUITE 103
6.4 CITY-ST-ZIP AVENTURA, FL 33180

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robert A. Tacher
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/99

Date

(305) 935-0255

Daytime Phone #

CR2E034 (1/98)