


2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90026 010 ****50.00

DOCUMENT # L00000000399

1. Entity Name
CANGUNN L.C.



Principal Place of Business Mailing Address

2106 BISPHAM RD. #B **2106 BISPHAM RD. #B**
SARASOTA FL 34231 **SARASOTA FL 34231**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

PATTERSON, JOHN
46 N. WASHINGTON BLVD. #1
SARASOTA FL 34236

7. Name and Address of New Registered Agent

Name _____

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

City _____ **FL** Zip Code _____

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS / MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM 1116304 ONTARIO LTD. <input type="checkbox"/> Delete 253 ROBINA RD. ANCASTER, ONTARIO, CANADA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM BALSALM L CORP. <input type="checkbox"/> Delete 95 ST. CLAIN AVE. W., #1605 TORONTO, ONTARIO, CANADA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM SANVIN, INC. <input type="checkbox"/> Delete 46 N. WASHINGTON BLVD., #1 SARASOTA FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM ENDIANG HOLDINGS INC <input type="checkbox"/> Delete 158 WARREN RD. TORONTO, ONTARIO, CANADA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM PARBIRDIE HOLEDINGS, INC. <input type="checkbox"/> Delete 2221 YONGE ST. TORONTO, ONTARIO, CANADA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM LOUGHEED, RONALD <input type="checkbox"/> Delete 216-3900 YONGE ST. TORONTO, ONTARIO, CANADA

10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *SIGNATURE REQUIRED* *Mar 21/03*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (10/02)