FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # L06202 1. Entity Name 02 DEC 18 PM 12: 18 WATERFORD PROPERTY HOLDINGS INC SELALETARY OF SIMIE TAT I AHASSEE, FLORIDA DO NOT WRITE IN THIS SPACE 2. Principal Place of Business 3. Mailing Address 11 CHURCH STREET 11 CHURC Suite. Apr. #. etc. Suite, Apt. #, etc 200 200 City & State City & State TOROUTO ONTARIO ONTARIC Country Country \$8.75 Additional 5. Certificate of Status Desired MSE IWI CANADA NJE IWI CANADA Fee Required 7. Name and Address of Current Registered Agent Name DO NOT WRITE Street Address (P.O. Bo Mumber istNot Acceptable) IN THIS SPACE 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) January 1 May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible After May 1, Fee is \$550.00 Amended UBR is \$61.25 10. Election Campaign Financing Tax filling requirement and elects to do so. \$5.00 May Be  $\Box$ Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS PSD TITLE CR2E034B (12/01) NAME POWERS, THOMAS E STREET ADDRESS 11 CHURCH STREET, STE 200 STREET ADDRESS CITY-ST-ZIP TORONTO, ON MEZINI CITY ST ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST ZIP TITLE TITLE NAME NAME . STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZP TITLE IN THIS SPACE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST:ZIP THE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP I hereby certify that the information sembled with this fling 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 or supplemental 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 11 or on an arrangement with an arrangement with an arrangement. attachment with an adjaress, with

SIGNING OFFICER OR DIRECTOR

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME O

## WATERFORD PROPERTY HOLDINGS INC.

11 CHURCH STREET SUITE 200 TORONTO, ONTARIO M5E 1W1

December 13th, 2002

Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, Florida 32314-6327

Attention: Sean Toner, Senior Section Administrator

Dear Mr. Toner:

Re: Letter Number: 202A00062801

We are in receipt of your letter dated November 20<sup>th</sup>, 2002. Our office did not receive a letter asking for corrections. I am attaching "Application for Reinstatement" forms received for the following corporation.

DOCUMENT:	FEL.	
L06202	98-0101014	Waterford Property Holdings Inc.

I was advised via telephone with your department that since the forms were previously filed and the relevant payment made, the only outstanding item was the Current Registered Agent Address.

The address should have been:

Mr. Ralph Smith 6003 Riverside Drive Yankeetown, Florida 34498

Please note I have attached all the original form along with the reinstatement form.

TELEPHONE: 416-861-5753 FAX: 416-861-0177

I trust this meets your needs and that no fee is appropriate. I can be reached at 416-861-5753 if there are any queries.

Thanking you in advance for your cooperation.

Yours very truly,

Russell Jacobsø

Att.