

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 08:00 AM
Secretary of State

DOCUMENT # L33484

1. Entity Name
MPI GROUP (FLORIDA) INC.



Principal Place of Business
11 CHURCH ST.
SUITE 200
TORONTO ONTARIO, CA M5E1W-1

Mailing Address
11 CHURCH ST.
SUITE 200
TORONTO ONTARIO, CA M5E1W-1

DO NOT WRITE IN THIS SPACE



04212004 No Chg-P CR2E034 (10/03)

4. FEI Number 98-0113221	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SMITH, RALPH SR.
6003 RIVERSIDE DR.
YANKEETOWN, FL 34498

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	VPD
NAME	YAZDI, BHARUCHA
STREET ADDRESS	11 CHURCH ST STE 200
CITY-ST-ZIP	TORONTO, ONTARIO, CA m5e 1w1
TITLE	VPD
NAME	JACOBSON, RUSSELL
STREET ADDRESS	11 CHURCH ST. STE. 200
CITY-ST-ZIP	TORONTO, ONTARIO, CA m5e 1w1
TITLE	VPD
NAME	POWERS, THOMAS E
STREET ADDRESS	11 CHURCH ST STE 200
CITY-ST-ZIP	TORONTO, ON m5e 1w1
TITLE	CEO
NAME	STEIN, MICHAEL
STREET ADDRESS	11 CHURCH STREET, STE 200
CITY-ST-ZIP	TORONTO, ON m5e 1w1
TITLE	CPSD
NAME	STEIN, MICHAEL
STREET ADDRESS	11 CHURCH STREET, STE 200
CITY-ST-ZIP	TOTONTO, ON m5e 1w1
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000133902
04/27/04-80107-019 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUSSELL JACOBSON 4/26/2004 (416) 861-5753

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #