

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L50102

Entity Name: M. GENE CANADA, P.A.

FILED  
Jan 04, 2005  
Secretary of State

## Current Principal Place of Business:

150 FORTENBERRY ROAD, #A  
VILLA "A"  
MERRITT ISLAND, FL 32952

## Current Mailing Address:

150 FORTENBERRY ROAD, #A  
VILLA "A"  
MERRITT ISLAND, FL 32952

## New Principal Place of Business:

150 FORTENBERRY ROAD  
VILLA  
MERRITT ISLAND, FL 32952

## New Mailing Address:

150 FORTENBERRY ROAD  
VILLA  
MERRITT ISLAND, FL 32952

FEI Number: 59-2987930

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CANADA, GENE  
539 HIDDEN HOLLOW DR.  
MERRITT ISLAND, FL 32952 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: CANADA, M. GENE,  
Address: 539 HIDDEN HOLLOW DR.  
City-St-Zip: MERRITT ISLAND FL,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GENE CANADA

P

01/04/2005

Electronic Signature of Signing Officer or Director

Date