

**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**Apr 14 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # M19655 (3)**

1. Corporation Name  
**MARDOR, INC.**



Principal Place of Business	Mailing Address
% SAMUEL RALPH. IVACO INC 770 SHERBROOKE ST W. 20TH FL MONTREAL QUE CANADA H3A 1G1	% SAMUEL RALPH. IVACO INC 770 SHERBROOKE ST W. 20TH FL MONTREAL QUE CANADA H3A 1G1

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 c/o P. Sorenti, Ivaco Inc. Suite, Apt. #, etc. 22 770 Sherbrooke St.W., 20F1. City & State 23 Montreal, Quebec Zip Country 24 H3A 1G1 25 Canada	26 c/o P. Sorenti, Ivaco Inc. Suite, Apt. #, etc. 27 770 Sherbrooke St.W., 20F1. City & State 28 Montreal, Quebec Zip Country 29 H3A 1G1 30 Canada

3. Date Incorporated or Qualified	4. FEI Number	Applied For
08/20/1985	59-2576955	Not Applicable
5. Certificate of Status Desired	6. Election Campaign Financing Trust Fund Contribution	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees
<input type="checkbox"/>	<input type="checkbox"/>	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

**CORPORATION INFORMATION SERVICES, INC.**  
 1201 HAYES STREET  
 TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PSD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERLING, MICHAEL	1.2 NAME	
STREET ADDRESS	770 SHERBROOKE ST. WEST	1.3 STREET ADDRESS	
CITY-ST-ZIP	MONTREAL QUE. CAN.	1.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOLDSTEIN, GEORGE	2.2 NAME	
STREET ADDRESS	770 SHERBROOKE ST. WEST	2.3 STREET ADDRESS	
CITY-ST-ZIP	MONTREAL QUE. CAN.	2.4 CITY-ST-ZIP	
TITLE	AS <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RALPH, SAMUEL	3.2 NAME	
STREET ADDRESS	770 SHERBROOKE ST WEST	3.3 STREET ADDRESS	
CITY-ST-ZIP	MONTREAL QUE CAN	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	AS
STREET ADDRESS		4.3 STREET ADDRESS	770 SHERBROOKE STREET WEST
CITY-ST-ZIP		4.4 CITY-ST-ZIP	MONTREAL, QUEBEC CANADA H3A 1G1
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: \_\_\_\_\_ April 1, 1998 (514) 288-4545

CR2E034 (10/97)