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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M19660

(3)

PHILIVAN, INC.

Mailing Address Principal Place of Business % SAMUEL RALPH IVACO INC % SAMUEL RALPH IVACO INC 770 SHERBROOKE ST W. 20TH FL 770 SHERBROOKE ST W. 20TH FL MONTREAL QUE. CANADA HIJA 1G1 MONTREAL QUE. CANADA H3A 1G1 3. Date Incorporated or Qualified 3a. Date of Last Report 08/20/1985 03/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3666960 Not Applicable 26 21 Suite, Apt. #, etc. Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be \Box Trust Fund Contribution 23 28 Added to Fees Ζip Country $Z_{\mathbb{P}}$ Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CORPORATION INFORMATION SERVICES, INC. 1201 HAYES STREET 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City 85 Zip Code 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 Signature, typicd or printed name of registered agont and title II applicable (NOTE: Registered Agent signature required when reinstating) (96/6)OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DPS DELETE Addition Change 1.1 TITLE TITLE IVANIER, PAUL NAME 1.2 NAME CR2E034 770 SHERBROOKE ST. WEST 1.3 STREET ADDRESS STREET AODRESS MONTREAL, QUE. CAN. CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change ■ Addition 21 TITLE TITLE **NANIER, PAUL** NAME 2.2 NAME 770 SHERBROOKE ST. WEST STREET ADORESS 2.3 STREET ADDRESS MONTREAL, QUE. CAN. CITY-ST-ZIP 2.4 CITY - ST - 7IP DELETE Change Addition 3.1 TITLE TITLE GOLDSTEIN, GEORGE NAME 3.2 NAME 770 SHERBROOKE ST. WEST 3.3 STREET ADDRESS STREET ADDRESS MONTREAL, QUE. CAN. CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition AS 41 TOLE Tille RALPH, SAMUEL 4. 2 NAME NAME 770 SHERBROOKE ST WEST 4.3 STREET ADDRESS STREET ADDRESS MONTREAL QUE CAN CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 51 TITLE Change Addition TIFLE 5.2 NAME **53 STREET ADDRESS** STREET ADDRESS CITY - ST - ZIF 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

SIGNATURE:

14. I do hereby certify that the information supplied with this information indicated on this annual report or supplying am an officer or director of the corporation or the reappears in Block 12 or Block 13 if changed, or o

SIGNATURE AND TYPIO OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

February 4, 1997

if filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the intal annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that ever or trustee expropried to execute this report as required by Chapter 607, Florida Statutes; and that my name

(514) 288-4545

FILED

Feb 14 1997 8:00am

Secretary of State