FILED
Jul 17, 2006 08:00 AM
Secretary of State

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # M36235

1. Entity Name
SALTWOOD ENTERPRISES, INC.

Principal Place of Business	Mailing Address
2500 N MILITARY TRAIL SUITE 206 BOCA RATON, FL 33431 US	6300 PARK AVENUE #608 MONTREAL,QUEBEC CANADA, h2v-4h8 CA

07062006 No Chg-P CR2E034 (11/05)

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4. FEI Number
59-1494153
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WEISBERG, ALLAN J
2500 N. MILITARY TRAIL #206
BOCA RATON, FL 33431

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 6, 2006

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SALZBERG, M.
STREET ADDRESS	2500 N. MILITARY TRAIL #206
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	VP
NAME	KUHNREICH, Y.
STREET ADDRESS	2231 BARCLAY AVENUE
CITY-ST-ZIP	MONTREAL, QUEBEC H351T,
TITLE	S
NAME	SALZBERG, V.
STREET ADDRESS	2500 N. MILITARY TRAIL #206
CITY-ST-ZIP	BOCA RATON, FL 33431
TITLE	T
NAME	SALZBERG, M.
STREET ADDRESS	2277 GOYER AVE
CITY-ST-ZIP	MONTREAL, QUEBEC CAN,
TITLE	D
NAME	SMOKE, PHILLIP
STREET ADDRESS	2323 GOYER AVE
CITY-ST-ZIP	MONTREAL, QUEBEC CAN,
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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07/18/06-80007-009 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ 10 July 2006
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #