

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

FILED
Feb 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **M43252** (9)
1. Corporation Name
MARCO CASTLE INVESTMENTS, INC.

Principal Place of Business 22 ST. CLAIR AVE., EAST, STE 1010 TORONTO, ONTARIO M4T 2S3 CANADA	Mailing Address 22 ST. CLAIR AVE., EAST, STE 1010 TORONTO, ONTARIO M4T 2S3 CANADA
---	---



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/15/1986	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 98-0086621	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country		Country		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 CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83				84 City	
				85 Zip Code FL	

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	PD	1.1 TITLE	CEO & CHAIRMAN, D
NAME	DIAMOND, A. E.	1.2 NAME	
STREET ADDRESS	1166 BAY ST. #2204	1.3 STREET ADDRESS	
CITY - ST - ZIP	TORONTO, ONT., CANADA	1.4 CITY - ST - ZIP	
TITLE	VD	2.1 TITLE	
NAME	DIAMOND, MICHAEL	2.2 NAME	
STREET ADDRESS	75 STRATHEARNE RD.	2.3 STREET ADDRESS	
CITY - ST - ZIP	TORONTO, ONT., CANADA	2.4 CITY - ST - ZIP	
TITLE	VSTD	3.1 TITLE	P, S, T, D.
NAME	DIAMOND, CAREY J.	3.2 NAME	
STREET ADDRESS	35 MILBANK AVE.	3.3 STREET ADDRESS	
CITY - ST - ZIP	TORONTO, ONT CAN	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
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, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **C. J. Diamond Feb 27/98 416 9615355**

CP2E034 (10/97)