## 2006 FOR PROFIT CORPORATION

## **FILED** Jul 17, 2006 08:00 AN ate

ANNOAL NEPONT				Secretary of Sta		
1. Entity Nam	MENT # M43920 e RCO, INC.	** <u>*</u>			Secretary or Sec	
331 RIVERVI	ipal Place of Business Mailing Address  RIVERVIEW DR. 331 RIVERVIEW DR.  ONTO, ON M4N-3-9 402  TORONTO, ON M4N-3-9			 		
DO NOT WRITE IN THIS SPACE			CE	07062006 No Chg-P CR2E034 (11/05)  4. FEI Number		
6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYES STREET SUITE 105 TALLAHASSEE, FL 32301			DO NOT WRITE IN THIS SPACE			
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  Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE						
FILE NOWIL! FEE IS \$150.00  Due by September 6, 2006  9. Election Campaign Finar  Trust Fund Contribution.			ncing \$5	\$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.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE TITLE	OFFICERS AND DI PD BECK, H. THOMAS 331 RIVERVIEW DRIVE TORONTO, ON M4N-39 STD BECK, CATHERINE ANNE 331 RIVRVIEW DRIVE TORONTO, ONTARIO, m4n 3c9	IRECTORS			U00000570704 07/18/06-80007-010 150.00	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME					, ·	

12. I hereby certify that the information supplied with this filling 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 attechment with an address, with all/other/like empowered.

**SIGNATURE:** 

STREET ADDRESS

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR