

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

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # M58680 (3)
1. Corporation Name
DELMAJOR LANDMARK, INC.



Principal Place of Business % SAMUEL RALPH. IVACO INC. 770 SHERBROOKE STREET WEST. 20TH FL MONTREAL QUE. CANADA H3A1G1	Mailing Address % SAMUEL RALPH. IVACO INC. 770 SHERBROOKE STREET WEST. 20TH FL MONTREAL QUE. CANADA H3A1G1
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 c/o P. Sorenti, Ivaco Inc. Suite, Apt. #, etc. 22 770 Sherbrooke St.W.20Flr City & State 23 Montreal, Quebec Canada Zip 24 H3A 1G1		2a. Mailing Address 26 c/o P. Sorenti, Ivaco Inc. Suite, Apt. #, etc. 27 770 Sherbrooke St. W.20Flr. City & State 28 Montreal, Quebec Canada Zip 29 H3A 1G1		3. Date Incorporated or Qualified 09/08/1987	
		4. FEI Number 98-0099140		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		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 SERVICE COMPNAY 1201 HAYES STREET TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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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	PSY IVANER, PAUL 770 SHERBROOKE ST. WEST MONTREAL, QUEB, CAN	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D IVANER, PAUL 770 SHERBROOKE ST. WEST MONTREAL, QUEB, CAN	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	ASV GOLDSTEIN, GEORGE 770 SHERBROOKE ST. WEST MONTREAL, QUEB, CAN	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	AS KASSAB, ALBERT 770 SHERBROOKE ST. WEST MONTREAL, QUEB, CAN	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	VD IVANER, SYDNEY 770 SHERBROOKE ST. WEST MONTREAL, QUEB, CAN	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	VAS RALPH, SAMUEL 770 SHERBROOKE ST. WEST MONTREAL, QUEB, CAN	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	
		AS SORENTI, PETER 770 SHERBROOKE STREET WEST MONTREAL, QUEBEC CANADA H3A 1G1	

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 19, 1998 (514) 288-4545

CR2E034 (10/97)