FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Mar 15, 2001 8:00 am **DOCUMENT # P00000025489 Secretary of State** 1. Entity Name 174316 CANADA INC. 03-15-2001 90008 004 ***150.00 Principal Place of Business Mailing Address 3920 INVERRARY BLVD. 3920 INVERRARY BLVD. UNIT C106 UNIT C106 LAUDERHILL FL 33319 LAUDERHILL FL 33319 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number ✓ Not Applicable. Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PAUL, SIMARD Y Street Address (P.O. Box Number is Not Acceptable) 3920 INVERRARY BLVD. **UNIT C106** LAUDERHILL FL 33319 Zip Code City 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 SIGNATURE 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 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. ☐ Addition Change TITLE ☐ Delete TITLE PAUL, SIMARD Y NAME NAME 3920 INVERRARY BLVD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33319 ☐ Addition ☐ Delete ☐ Change TITLE TITLE LOUISE, SIMARD NAME NAME STREET ADDRESS 3920 INVERRARY BLVD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33319 ☐ Delete TITLE ☐ Change Addition TITLE FRANCOIS, SIMARD NAME NAME STREET ADDRESS 3920 INVERRARY BLVD. STREET ADDRESS: CITY-ST-ZIP CITY-ST-ZIP LAUDERHILL FL 33319 ☐ Addition ☐ Delete ☐ Change TITLE TITLE NATHALIE COOK NAME NAME 3920 moverrary Alved LOUDERHILL, FL 33319 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

march 12/2001 954-730-352