

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056556

Entity Name: 6655 FLORIDA INC.

FILED
Jan 15, 2008
Secretary of State

Current Principal Place of Business:

534 LAWRENCE AVE W
215
TORONTO, ON m6a 1a2 XX

Current Mailing Address:

534 LAWRENCE AVE W
215
TORONTO, ON m6a 1a2 XX

New Principal Place of Business:

534 LAWRENCE AVE W
215
TORONTO, ON M6A 1A2 XX

New Mailing Address:

534 LAWRENCE AVE W
215
TORONTO, ON M6A 1A2 XX

FEI Number: 98-0399557

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SOTIRIOS, VAREUS
1104 MALLORCA DR
BRADENTON BEACH, FL 34209 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MASTERS, GORDON
Address: 223 BERKELEY ST.
City-St-Zip: TORONTO ON, CN M5A 2X3

Title: SD () Delete
Name: VARELIS, EVA
Address: 215-534 LAWRENCE AVE W
City-St-Zip: TORONTO, CANADA, CA MGA 1A2

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GORDON MASTERS

PTD

01/15/2008

Electronic Signature of Signing Officer or Director

Date