## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000108015

Entity Name: YOLLES ENGINEERS, INC.

FILED Sep 14, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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163 QUEEN STREET EAST STE 200 207 QUEENS QUAY WEST., SUITE 550, BOX 132 TORONTO, ON M5A 1S1

TORÓNTO, ON M5J 1A7

**Current Mailing Address: New Mailing Address:** 

163 QUEEN STREET EAST STE 200 207 QUEENS QUAY WEST., SUITE 550, BOX 132

TORONTO, ON M5A 1S1 TORONTO, ON M5J 1A7

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

F&L CORP ONE INDEPENDENT DRIVE **SUITE 1300** JACKSONVILLE, FL 32202 US

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:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition

BLASUTTA, HUGO BLASUTTA, HUGO Name: Name:

207 QUEENS QUAY WEST,, SUITE 550, BOX 132 163 QUEEN STREET EAST STE 200 Address: Address:

City-St-Zip: TORONTO ONTARIO, M5A 151 CA City-St-Zip: TORONTO ONTARIO, CA M5J 1A7 CA

() Delete Title: Title: (X) Change ( ) Addition

Name: BERGMANN, ANDREW Name: BERGMANN, ANDREW

163 QUEEN STREET EAST STE 200 207 QUEENS QUAY WEST,, SUITE 550, BOX 132 Address: Address:

TORONTO ONTARIO, M5A 151 CA TORONTO ONTARIO, CA M5J 1A7 CA City-St-Zip: City-St-Zip:

Title: Title: D ( ) Delete D (X) Change ( ) Addition

PASUT, MARY PASUT, MARY Name: Name:

163 QUEEN STREET EAST STE 200 207 QUEENS QUAY WEST., SUITE 550, BOX 132 Address: Address:

City-St-Zip: TORONTO ONTARIO, M5A 151 CA City-St-Zip: TORONTO ONTARIO, CA M5J 1A7 CA

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: MARY R. PASUT D 09/14/2007