2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 17, 2007 8:00 am Secretary of State DOCUMENT # P06000117082 1. Entity Name 04-17-2007 90243 033 ***150.00 CAN-AM REAL ESTATE CO. Principal Place of Business Mailing Address գկնթոοτο 1000 E ATLANTIC BLVD 1000 E ATLANTIC BLVD POMPANO BEACH FL 33060 POMPANO BEACH FL 33060 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 14-1979127 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Blouin Marc A BLOUIN, LUCILLE Stroot Address (P.O. Box Number is Not Accordable) Ste 205E 1000 E ATLANTIC BLVD 205 E POMPANO BEACH FL 33060 Pompano Beach 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 SIGNATURE (NOTE: Registated Agent signature required which roinstating) FILE NOW!!! FEE IS \$150,00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. HILL Delete HILE [] Change ■ Addition BLOUIN, LUCILLE NAME 1000 E ATLANTIC BLVD STE, 205E STREET ADDRESS SHILL LADDER POMPANO BEACH FL 33060 CITY ST-ZIP CITY ST ZIP THLE ☐ Delete TITLE Change Addition BLOUIN, MARC A SR Blouin, Marc A Sr NAME 1000 E ATLANTIC BLVD STE 205E STREET ADDRESS SIRELIADDNSS 1000 E Atlantic Blvd. Ste 205E POMPANO BEACH FL 33060 CHY ST ZIP Pompano Beach Fl. 33060 DHI □ D<u>el</u>ote ıyıı NAME NAME Dandurand Sylvain STREET ADDRESS STREET ADDRESS 208 Beau Marchais CHY SLZIP CITY ST-7IP Le Gardeuf P.O. Canada J5Z-4E5 Ш Delete THUE ☐ Change ☐ Addition NAME NAMI STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY ST ZIP TITLE ☐ Delete Inu ☐ Change Addition NAME NAM STREET ADDRESS STREET ADDRESS CITY-SI-7IP CHY St-ZIP 11111 ☐ Delete HILE ☐ Change Addition NAMI STREET ADDRESS STREET ADDRESS CHY-S1-7IP CHY-ST-ZIP 12. I horoby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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 attachment with an address, with all other like empowered.

FILED

04/03/07 954-786-8141 SIGNATURE: