FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

DOCUMENT # P09684 (2)

1. Corporation Name
METRO INTERNATIONAL PROPERTIES U.S., INC.

Principal Place of Business	Mailing Address
~~360 BAY ST~~	~~360 BAY ST~~
~~STE. 600~~	~~STE. 600~~
~~ONTARIO CA~~	~~ONTARIO CA~~

3. Date Incorporated or Qualified: 04/08/1986
3a. Date of Last Report: 04/29/1994
4. FEI Number: 58-1654572 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 390 BAY STREET	26 390 BAY STREET
Suite, Apt. #, etc: 22 SUITE 1900	Suite, Apt. #, etc: 27 SUITE 1900
City & State: 23 TORONTO, ONTARIO	City & State: 28 TORONTO, ONTARIO
Zip: 24 M5H 2Y2 — Country: 25 CANADA	Zip: 29 M5H 2Y2 — Country: 30 CANADA

9. Name and Address of Current Registered Agent

CORPORATION INFORMATION SERVICES, INC.
1201 HAYS ST
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

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	APPS, ALFERD
STREET ADDRESS	360 BAY ST.
CITY ST ZIP	TORONTO, ON CA M5H2V-6
TITLE	VD
NAME	BEIRNES, DAVID
STREET ADDRESS	360 BAY ST.
CITY ST ZIP	TORONTO, ON CA M5H2V-6
TITLE	VTD
NAME	RIMER, RONALD A
STREET ADDRESS	360 BAY ST.
CITY ST ZIP	TORONTO, ON CA M5H2V-6
TITLE	VD
NAME	FRENCH, DANIELLE
STREET ADDRESS	360 BAY ST.
CITY ST ZIP	TORONTO, ON CA M5H2V-6
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		☑ Change ☐ Addition
12 NAME		
13 STREET ADDRESS	390 BAY STREET	
14 CITY ST ZIP	TORONTO, ONT. CANADA M5H 2Y2	
21 TITLE		☑ Change ☐ Addition
22 NAME		
23 STREET ADDRESS	390 BAY STREET	
24 CITY ST ZIP	TORONTO, ONT. CANADA M5H 2Y2	
31 TITLE		☑ Change ☐ Addition
32 NAME		
33 STREET ADDRESS	390 BAY STREET	
34 CITY ST ZIP	TORONTO, ONT CANADA M5H 2Y2	
41 TITLE		☑ Change ☐ Addition
42 NAME		
43 STREET ADDRESS	390 BAY STREET	
44 CITY ST ZIP	TORONTO, ONT. CANADA M5H 2Y2	
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY ST ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY ST ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(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: [signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 04/20/95 Date — (416) 869-7800 Daytime Phone #

0492608 IN