

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15808

FILED
Apr 08, 2005
Secretary of State

Entity Name: I.B. KNELL HOLDINGS INC. - GESTION I.B. KNELL INC.

Current Principal Place of Business:

3577 ATWATER AVE
#1507
MONTREAL QUEBEC H3H2R2,

New Principal Place of Business:

300 LEO PARISEAU
MONTREAL QUEBEC H2X 4B5, PQ CA

Current Mailing Address:

I.B. KNELL HOLDINGS, INC.
3577 ATWATER AVENUE, SUITE 1507
MONTREAL, QU H3H2R CA

New Mailing Address:

I.B. KNELL HOLDINGS, INC.
300 LEO PARISEAU
MONTREAL LQUEBEC H2X 4B5, PQ CA

FEI Number: 52-1495553

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLINE, ARTHUR J.
2665 S. BAYSHORE DRIVE, S-903
COCONUT GROVE, FL 33133 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: PSD () Delete
Name: KNELLER, IGNACY,
Address: 3577 ATWATER AVE., #1507
City-St-Zip: MONTREAL, QUEBEC,

Title: VP () Delete
Name: FREUNDLICH, BARBARA
Address: 3577 ATWATER AVE #1507
City-St-Zip: MONTREAL, QUEBEC,

Title: VP () Delete
Name: KAROLINSKI, ANNIE
Address: 3577 ATWATER AVENUE, #1507
City-St-Zip: MONTREAL, QUEBEC,

Title: VP () Delete
Name: GOLD, DINA
Address: 5892 DAVID LEWIS
City-St-Zip: COTE ST LUC, QU H3X 4

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 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: IGNACY KNELLER

PSD

04/08/2005

Electronic Signature of Signing Officer or Director

Date