2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15809

tity Name: 152945 CANADA INC

7 COLECHESTER

HAMPSTEAD, CANADA, PQ H3X-39 CA

Address: City-St-Zip: FILED Mar 02, 2007 Secretary of State

| Entity Name: 152945 CANADA INC. | | | | | |
|---|--|--------------------------|---|---|--|
| Current Principal Place of Business: | | | New Principal Place o | New Principal Place of Business: | |
| 17098 COL SUITE 101 SUNNY IS | LLINS AVE LES BEACH, FL 33160 | | | | |
| Current Mailing Address: | | | New Mailing Address: | New Mailing Address: | |
| SUITE 101 | ERREBONNE al H4A 3R7, PQ | | | | |
| FEI Number: | 52-1495817 FEI Nun | nber Applied For() | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Address of | Name and Address of New Registered Agent: | |
| LESNIAK, STANLEY 17098 COLLINS AVE SUNNY ISLES BEACH, FL 33160 US | | | | LESNIAK, STANLEY 10893 KING BAY DRIVE BOCA RATON, FL 33498 US | |
| The above in the State | named entity submits t of Florida. | nis statement for the pu | urpose of changing its registered | office or registered agent, or both, | |
| SIGNATURE: | | | | 03/02/2007 | |
| | Electronic Signat | ure of Registered Ager | nt | Date | |
| Election Car | npaign Financing Trust Fu | nd Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CHANGES | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | PAS () Delete LESNIAK, STEFAN 7 COLECHESTER HAMSTEAD, QUEBEC, PO | 1 H3X 3V9 CA | Title: (Name: Address: City-St-Zip: |) Change ()Addition | |
| Title: Name: Address: City-St-Zip: | SD () Delete GERSZON, ELAINE ROSN 92 HILTON TORONTO, ONTARIO, PQ | | Title: (Name: Address: City-St-Zip: |) Change ()Addition | |
| Title: Name: | VD () Delete LESNIAK, STANLEY | | Title: (Name: |) Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: STEFAN LESNIAK PAS 03/02/2007