2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State
04-20-2005 90309 024 ***150.00

DOCUMENT # P22346

1. Entity Name
ABITIBI CONSOLIDATED SALES CORPORATION

20039029

03172005 Chg-P CR2E034 (10/03)

Principal Place of Business	Mailing Address
4 GANNETT DRIVE WHITEPLANS, NY 10604 US	% ABITIBI CONSOLIDATED 1155 METCALFE ST #800 MONTREAL QUEBEC CANADA H3-B5H2,

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	c/o Tax Dept. 1155 Metcalfe Suite, Apt. #, etc. Suite 800
City & State	City & State Montreal (Quebec)
Zip / Country	Zip / Country H3B 5H2 / Canada

4. FEI Number 13-1837144 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V ZGOL, RICHARD 277 SPUR NORTH SNOWFLAKE, AZ 85937	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WARREN, Barry 4, Gannett Drive White Plains (NY) 106043408	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD VACHON, J. P. 1155 METCALFE STREET, SUITE 800 MONTREAL, QUEBEC CANADA, H3B5H2	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RANGER, Luc 4, Gannett Drive White Plains (NY) 106043408	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BLAINE, BREEN 4 GANNET DR. WHITE PLAINS, NY 106043408	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BLAINE, Breen 4, Gannett Drive White Plains (NY) 106043408	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ROUGEAU, PIERRE 1155 METCLAFE STREET, SUITE 800 MONTREAL, QUEBEC CANADA, H3B5H2	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V WHARTON, Darryl 3950 Delamar Drive Cumming (GA) 30041	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V DEA, ALLEN 1155 METCALFE STREET, SUITE 800 MONTREAL, QUEBEC CANADA, H3B5H2	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SCHIRMER, DAVID A 4 GANNET DR. WHITE PLAINS, NY 106043408	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Jacques P. Vachon 2005-03-18 (514) 394-2296
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #