

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT
CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 JUL 24 AM 9:49

DOCUMENT # P28895 (1)

1. Corporation Name

THE WHITNEY EQUITY CORPORATION

Principal Place of Business

**7200 HUTCHISON
SUITE 100, MONTREAL, QUEBEC H3N 1Z2
CANADA**

Mailing Address

**7200 HUTCHISON
SUITE 100, MONTREAL, QUEBEC H3N 1Z2
CANADA**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/13/1990

3a. Date of Last Report

07/12/1994

4. FEI Number

38-2097968

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

21 7200 Hutchison

Suite, Apt. #, etc.

2a. Mailing Address

2a 7200 Hutchison

Suite, Apt. #, etc.

22 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

**PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301-2**

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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

(Signature, typed or printed name of registered agent and title if applicable) (DATE) (Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PELUSO, JOANNE
STREET ADDRESS	3430 GEOFFRION ST.
CITY ST ZIP	VILLE ST. LAURENT, QUE
TITLE	STV
NAME	BERAZNIK, HYMAN
STREET ADDRESS	2 HARLAND PLACE
CITY ST ZIP	HAMPSTEAD, QUEBEC, CA
TITLE	D
NAME	BERAZNIK, HYMAN
STREET ADDRESS	2 HARLAND PLACE
CITY ST ZIP	HAMPSTEAD, QUEBEC, CA
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY ST ZIP	

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY ST ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY ST ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY ST ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY ST ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY ST ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 110.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joanne Peluso

June 16, 1995

(514)274-2000