

## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

| DOCUMENT # P30465  1. Entity Name 877974 ONTARIO INC.   |  |              |          |  |       |   |                         | 05                 | FIL<br>JAN 18 | PH 3:                     |                |
|---|--|--------------|----------|--|-------|---|-------------------------|--------------------|---------------|---------------------------|----------------|
| Principal Place of Business<br>6403 PARC CORNICHE, #4211<br>ORLANDO, FL 32835   |  |              | 2        | lailing Address<br>25 COLDWATER RD., P<br>COLDWATER, ONTARIO<br>CANADA LOK1EO, | 245   |   | SEC<br>TALL             | RETAINT<br>AHASSE  | E, FLOR       | TE<br>IDA<br>IIITUUR      |                |
| 2. Principal Place of Business  |  |              |          | 3. Mailing Address   |       |   | <b>₩</b>                |                    |               |                           |                |
| Suite, Apt. #, etc.   |  |              |          | Suite, Apt. #, etc.  |       |   | 0,565004                | NS IN              |               | 340003                    | 04:05          |
| City & State  |  |              |          | City & State   |       | 4. FEI Numb                                       |                         |                    | No            | oplied For ot Applicable  |                |
| Zip   | Country  |              |          | Zip Coun   |       | ntry  | 5. Certificate of State |                    | d 📙           | \$8.75 Add<br>Fee Require | ditional<br>ed |
| Name and Address of Current Registered Agent  |  |              |          |  |       | 7. Name and Aridress of New Registered Agent Name |                         |                    |               |                           |                |
| STARK, WILLIAM C.<br>6403 PARC CORNICHE, #4211<br>ORLANDO, FL 32835   |  |              |          |  |       |   | (P.O. Box Numb          | per is Not Accepta | સાંગલ)        |                           |                |
|   |  |              |          |  |       | City  |                         |                    | FL            | Zip Cod                   | le             |
| 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 Signature, typoid or printed name of registered agent and tide d'applicable. (NOTE: Registered Agent signature required when reutstating)  DATE   |  |              |          |  |       |   |                         |                    |               |                           |                |
| FILE NOW!!! FEE IS \$150.00  After May 1, 2004 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees  |  |              |          |  |       |   |                         |                    |               |                           |                |
| 10.   |  | OFFICERS AND | DIRE     | CTORS  | 11.   |   | ADDITIONS               | /CHANGES TO C      | OFFICERS AN   | DIRECTOR                  | S IN 11        |
| TITLE   | PD Delcte  |              |          |  | TITLE |   |                         |                    |               | Change                    | Addition       |
| NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | STARK, SHEILA K<br>33 PINE RIDGE TRAIL RR #1 BARRIE<br>ONTARIO, CA       |              |          |  |       | AE:<br>EET ADORESS<br>(-\$T-ZIP                   |                         |                    |               |                           |                |
| TITLE NAME STREET ADORESS GITY-ST-ZIP   | STO Delcte STARK, WILLIAM C 33 PINE RIDGE TRAIL RR #1 BARRIE ONTARIO, CA |              |          |  |       | E<br>AE<br>EET ADDRESS<br>(-\$1-ZIP               | 2000449770999           |                    |               |                           | Addition . 00  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |              |          | ☐ Delete   |       |   |                         |                    |               | Change                    | Addition       |
| HITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |              |          | ☐ Delete   |       | 1   |                         |                    |               | Change                    | Addition       |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |              |          | ☐ Delete   |       | l l   |                         |                    |               | ☐ Change                  | Addition       |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  |              | <u> </u> | Delete   |       |   |                         |                    |               | ☐ Change                  | Addition       |
| 12. I hereby cortify that the information supplied with this tiling 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 supplied minimal report is frue and accurate and that try signature shall have the same legal effect as it made under eath; that I am an officer or director of the corporation of the expire or trustee employees to receive this report as required by Chapter 667. Florida Statutes; and that my name appears in Block 10 or Block 11 it changed, or on an attachment with an attitude of the processor. |  |              |          |  |       |   |                         |                    |               |                           |                |
| SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date of Doving Priors 4   |  |              |          |  |       |   |                         |                    |               |                           |                |



## 877974 Qntario Inc 25 Coldwater Road Coldwater, Ontario L0K 1E0

January 7, 2005

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Further to my conversation this afternoon with one of your examiners I am writing to say that on January 29, 2004 I signed and completed the 2004 For Profit Corp Annual Report and mailed it that same day to your office, together with my cheque for \$150.00. I have enclosed a photo copy of the signed return. Since that time I have not received any other notices from your office indicating that you had not received the form.

At your examiners suggestion I have enclosed my cheque in the amount of \$300.00 to cover the 2004 and 2005 return and ask that the late fee for 2004 be waived.

Thank you for your consideration.

William Stark

Yours truly