FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P31453** **(4)**

1. Corporation Name

SHERFAM INDUSTRIES, INC.

Principal Place of Business	Mailing Address
150 SIGNET DRIVE WESTON. TORONTO M9L 1T9 CANADA	150 SIGNET DRIVE WESTON. TORONTO M9L 1T9 CANADA

3. Date Incorporated or Qualified: **10/23/1990**

3a. Date of Last Report: **02/08/1995**

2. Principal Place of Business — 21:

Suite, Apt. #, etc. — 22:

City & State — 23:

Zip — 24: Country — 25:

2a. Mailing Address — 26:

Suite, Apt. #, etc. — 27:

City & State — 28:

Zip — 29: Country — 30:

4. FEI Number: **NOT APPLICABLE** ☐ 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

9. Name and Address of Current Registered Agent

SCHWARTZ, RICHARD
% MAYNARD RICH PROPERTIES CORP
7850 NW 146TH ST., #408
MIAMI LAKES FL 33016

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 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: N/A
Signature, typed or printed name of registered agent and title if applicable — (NOTE: Registered Agent signature required when changing agent) — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	FLORENCE, M. F.		1.2 NAME	
STREET ADDRESS	150 SIGNET DRIVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	WESTON, CANADA M9L 1T9		1.4 CITY-ST-ZIP	
TITLE	VVC	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	SHERMAN, BERNARD		2.2 NAME	
STREET ADDRESS	150 SIGNET DRIVE		2.3 STREET ADDRESS	
CITY-ST-ZIP	WESTON, CANADA M9L 1T9		2.4 CITY-ST-ZIP	
TITLE	ST	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	BAXTER, CRAIG		3.2 NAME	
STREET ADDRESS	150 SIGNET DRIVE		3.3 STREET ADDRESS	
CITY-ST-ZIP	WESTON, CANADA M9L 1T9		3.4 CITY-ST-ZIP	
TITLE	AS	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	SCHWARTZ, RICHARD		4.2 NAME	500001736745
STREET ADDRESS	150 SIGNET DRIVE		4.3 STREET ADDRESS	-03/08/96--01019--011
CITY-ST-ZIP	WESTON, CANADA M9L 1T9		4.4 CITY-ST-ZIP	***200.00
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			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 119.07(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 added in attachment with an address.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MICHAEL FLORENCE

1/25/96 Date

416 749 9300 Daytime Phone #

SC 3-7-96

CR2E034 (12/95)