

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90090 028 ***150.00

DOCUMENT # P33211

1. Entity Name
 VIRTUAL PROTOTYPES U.S.A., INC.

Principal Place of Business

4700 DE LA SAVANE
 MONTREAL QUEBEC
 CANADA H4P 1T7

Mailing Address

4700 DE LA SAVANE
 MONTREAL QUEBEC
 CANADA H4P 1T7

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State -

City & State

Zip

Country

Zip

Country

4. FEI Number

98-0095832

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

C T CORPORATION SYSTEM
 1200 SOUTH 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
 NAME EUGENE, JOSEPH
 STREET ADDRESS 8 SURREY GARDEN
 CITY-ST-ZIP WESTMOUNT, QC CANADA H5Y1N3

TITLE D ☐ Change ☒ Addition
 NAME REAL MINEAULT
 STREET ADDRESS 9026 SAN FRANCISCO
 CITY-ST-ZIP BROSSARD, QC CANADA J4X 2R6

TITLE D ☐ Delete
 NAME HURTUBISE, LIONEL
 STREET ADDRESS 10 HAZELWOOD
 CITY-ST-ZIP DOLLARD DES ORMEAUX, CA

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☒ Delete
 NAME LOHEZIC, FRANCOISE
 STREET ADDRESS C/O THOMSON CSF VENTURES, 173 BOUL HAUSSMA
 CITY-ST-ZIP PARIS CENTER 08 FR 75415

TITLE D ☐ Change ☒ Addition
 NAME JEAN DUFOUR
 STREET ADDRESS C/O THOMSON CSF VENTURES
 CITY-ST-ZIP 173 Boul Haussma PARIS Center 08
 FR 75415

TITLE PCEO ☐ Delete
 NAME COLLARD, PHILIPPE
 STREET ADDRESS 4700 DE LA SAVANE, #300
 CITY-ST-ZIP MONTREAL QC H4P1T

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME SIMONS, JOHN
 STREET ADDRESS 255 ST JACQUES OUEST
 CITY-ST-ZIP MONTREAL QUEBEC J3G 2C7

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D ☐ Delete
 NAME HAHN, KEITH
 STREET ADDRESS 1 FEDERAL SYSTEMS PARK DR.
 CITY-ST-ZIP FAIRFAX VA

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Anna Friedman
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)