

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 # P33855 (8)

1. Corporation Name

CANASA TRADING CORPORATION



Principal Place of Business

350 S BUENA VISTA ST  
BURBANK CA 91521  
US

Mailing Address

500 S. BUENA VISTA ST.  
BURBANK CA 91521-0340  
US

3. Date Incorporated or Qualified

05/07/1991

3a. Date of Last Report

05/02/1995

2. Principal Place of Business

2a. Mailing Address

21

26

500 SOUTH BUENA VISTA STREET

95-2656934

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

BURBANK, CA

Zip

Country

Zip

Country

24

25

29

91521-0586

30

USA

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fees 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

10. Name and Address of New Registered Agent

IOPPOLO, FRANK S.  
1375 BUENA VISTA DR.  
4TH FLOOR NORTH; ATTN: LEGAL DEPT.  
LAKE BUENA VISTA FL 32830

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME  
BOYD, BARTON K.  
STREET ADDRESS  
500 S BUENA VISTA ST  
CITY - ST - ZIP  
BURBANK CA 91521

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
D  
LITVACK, SANFORD M.  
STREET ADDRESS  
500 S. BUENA VISTA ST.  
CITY - ST - ZIP  
BURBANK CA 91521

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
SD  
REED, MARSHA L  
STREET ADDRESS  
500 S BUENA VISTA ST  
CITY - ST - ZIP  
BURBANK CA 91521

3.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
T  
SHELBOURN, ALVIN L.  
STREET ADDRESS  
500 S BUENA VISTA ST  
CITY - ST - ZIP  
BURBANK CA 91521

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

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 on an attachment with an address.

SIGNATURE: MARSHA L. REED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96

(818) 560-1000

Date

Daytime Phone #

CR2E034 (12/95)