


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P35254	
1. Entity Name AIPG REALTY CORPORATION	

Principal Place of Business C/O C T CORPORATION SYSTEM P.O. BOX 631 WILMINGTON, DE 19899	Mailing Address 50 BARTOR ROAD TORONTO, ONTARIO, ma-m295 CA
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DO NOT WRITE IN THIS SPACE

04212004 No Chg-P CR2E034 (10/03)	
4. FEI Number 51-0334547	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324	DO NOT WRITE IN THIS SPACE
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing)</small>	DATE _____
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FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000125052 04/22/04 00000-013-150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROSE, BARRIE D 2100-38 AVE ROAD TORONTO, ONT., CANADA,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ROSE, JOHN A. 28 PEVERIL HILL ROAD NORTH TORONTO, ON
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ROSE, ROBERT A 44 ST JOSEPH STREET STE 2614 TORONTO, ON
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ROSE, PAUL A. 2100-38 AVE ROAD TORONTO ONT. CAN MSR263,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	Date <u>April 21, 2004</u>	Daytime Phone # <u>416 745-3233</u>
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BARRIE D. ROSE, PRESIDENT