

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

May 31, 2000 8:00 am
Secretary of State

05-31-2000 90030 037 ***550.00

DOCUMENT # P35569

1. Entity Name

NEIL SHORE TEXAS, INC.

Principal Place of Business

Mailing Address

95 ST. CLAIR AVENUE WEST, SUITE 1102
TORONTO, ONTARIO
CANADA M4V 1N6
OC

95 ST. CLAIR AVENUE WEST, SUITE 1102
TORONTO, ONTARIO
CANADA M4V 1N6
OC

2. Principal Place of Business

3. Mailing Address

446 Spadina Road

446 Spadina Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

3rd Floor

3rd Floor

City & State

City & State

Toronto, Ontario

Toronto, Ontario

Zip

Country

Zip

Country

MSP 3M2

Canada

MSP 3M2

Canada



DO NOT WRITE IN THIS SPACE

4. FEI Number

76-0089226

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

CT CORPORATION SYSTEM
1200 S. 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, 2000 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 **PD** ☐ Delete
NAME **SHORE, NEIL**
STREET ADDRESS **95 ST. CLAIR AVENUE WEST, SUITE 1102**
CITY-ST-ZIP **CANADA M4V 1N6**

TITLE ☒ Change ☐ Addition
NAME **446 Spadina Road, 3rd Floor**
STREET ADDRESS **Toronto, Ontario, Canada** **MSP 3M2**
CITY-ST-ZIP

TITLE **STD** ☐ Delete
NAME **SOBERANO, RALPH**
STREET ADDRESS **95 ST. CLAIR AVENUE WEST, SUITE 1102**
CITY-ST-ZIP **CANADA M4V 1N6**

TITLE ☒ Change ☐ Addition
NAME **446 Spadina Road, 3rd Floor**
STREET ADDRESS **Toronto, Ontario, Canada** **MSP 3M2**
CITY-ST-ZIP

TITLE ☐ Delete
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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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RALPH SOBERANO

May 11/00 (416) 486-7644
Date Daytime Phone #

CR2E034 (9/99)