2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P38731

Entity Name: 72091 MANITOBA LTD., INC.

FILED Feb 03, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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C/O MARTIE MARTIN C/O MARTIE MARTIN, 7 EVERGREEN PLACE

2600 SEVEN EVERGREEN PLACE 2600

WINNIPEG, MANITOBA, CANADA, R3L-23 WINNIPEG, MB R3L2T3 CA

Current Mailing Address: New Mailing Address:

C/O MARTIE MARTIN C/O MARTIE MARTIN, 7 EVERGREEN PLACE

2600 SEVEN EVERGREEN PLACE 2600 WINNIPEG, MANITOBA, CANADA, R3L-23

WINNIPEG, MB R3L2T3

FEI Number: 98-0107502 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PIRES, ANTHONY P., JR. 3200 TAMIAMI TRAIL NORTH SUITE 200 NAPLES, FL 34103 US

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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition THORSTEINSON, ARNI, THORSTEINSON, ARNI C Name: Name:

2600 - 7 EVERGREEN PLACE 2600 - 7 EVERGREEN PLACE Address: Address: City-St-Zip: WINNIPEG MANITOBA CANADA, R3L2T3 City-St-Zip: WINNIPEG, MB R3L2T3 CA

Title: Title: (X) Change () Addition () Delete

Name: BLAIR, RICHARD N Name: BLAIR, RICHARD N

2600 - 7 EVERGREEN PLACE Address: 2600 - 7 EVERGREEN PLACE Address: WINNIPEG, MB R3L2T3 CA WINNIPEG MANITOBA CANADA, R3L2T3 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARNI C. THORSTEINSON 02/03/2009 D