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Apr 27, 1999 8:00 am Secretary of State

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200009665

1. Corporation Name

HARRIS FUNERAL HOME, INC.

											11 1 1 1 1 1 1 1 1 1
Principal Flace	of Business	Mailing Address								•	*****
932 NORTH OHIO AVENUE MASONRY SERVICE BUILDING LIVE OAK FL 32060		4126 NORLAND AVENUE BURNABY, B.C. V5G 3SB CN				DO NOT WE	RITE IN THIS S	SPAC	E		
						3. Date Inco	orporated or Qualife	đ			
						12/07/1	1992				
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Num	ber			Ap.	lied For
21		26				52-180	3506			No	Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5 Certify ats	e of Status Desired				dditional
22		27				J. Certificate			F	ee Re	quired
City & State	e	City & State				6. Election 6	Campaign Financing	9 [7]			Vlay Be
23		28				Trust Fur	nd Contribution		A	dded to	Fees
Zip	Country	Zip	Coun	ntry		· · · · · ·	oration owes the cu	irrent year inta			
24	25	29	30				Property Tax.		Ye	s	□No
	9. Name and Address of Current	Registered Agent		-aT		10. Name ar	nd Address of New	Registered A	gent		
OT C	ORPORATION SYSTEM			81	Name						
	SOUTH PINE ISLAND ROAD		t	82	Street A	dress (P.O. Bo. N	lumber is Not Accep	otable)	_		
				_							
PLAN	ITATION FL 33324			83							
;			-	84	City				85	Zip C	ode
					-			<u> </u>			
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida State	ites, the ab	ove-r	named c	orporation submits	this statement for the	ie purpose of d ept the anipoin	:hangi tment	ng its as rec	registered istered
office or re	to the provisions of S∋ctions 607.0502 egistered agent, or b∈th, in the State α m familiar with, and a cept the obligate	of Florida. Such change was	authorized	by th	named corpor	orporation submits ation's board of directions	this statement for the ectors. I hereby acc	ept the appoin	hangi tment	ng its as reg	registered istered
office or re agent. I as	egistered agent, or b∈th, in the State o m familiar with, and abcept the obligat⊮	of Florida. Such change was eons of, Section 607.0505, Fi	authorized orida Statui	by th tes.	ne corpor	ation's board of dire	this statement for the ectors. I hereby acc	ерт тпе арроіп	hangi tment	ng its as reg	registered istered
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14. I herety 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 annual report is supplemental annual report is true and accurate and that my signat are 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 fustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changes on an attractment with an address, with all other like empowered.

APRIL 20, 1999 (604) 299-9321

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

HART, PAUL

STREET ADDRESS 3190 TREMONT AVENUE

SIGNATURE REQUIRETERS. HYNDMAN SIGNAT TRE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

APRIL 20, 1999 Date

JOSEPT T. HARDIMAN

801 TEAS ROAD

Daytime Phone #