

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 # **P92000011980 (9)**

1. Corporation Name
ARBUTUS HOLDINGS (FLORIDA), INC.



Principal Place of Business: **877 EXECUTIVE CENTER DR W STE 303 ST PETERSBURG FL 33702 US**
Mailing Address: **PO BOX 22095 ST PETERSBURG FL 33742 US**

3. Date Incorporated or Qualified: **12/15/1992**
3a. Date of Last Report: **03/31/1995**
4. FEI Number: **59-3154513**
5. Certificate of Status Desired: **\$8.75 Additional Fee 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

2. Principal Place of Business: 21 Suite, Apt. #, etc.: 22 City & State: 23 Zip: 24 Country: 25
2a. Mailing Address: 26 Suite, Apt. #, etc.: 27 City & State: 28 Zip: 29 Country: 30

9. Name and Address of Current Registered Agent

**MASCARA, ERNEST L
877 EXECUTIVE CENTER DR W
STE 303, GLADES BLDG
ST PETERSBURG FL 33702**

10. Name and Address of New Registered Agent

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: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: _____ NAME: DPTS CARSON, RICHARD STREET ADDRESS: 333 DENISON STR #11 CITY-STATE-ZIP: MARKHAM ON	<input type="checkbox"/> DELETE	11 TITLE: _____ 12 NAME: _____ 13 STREET ADDRESS: _____ 14 CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/> DELETE	21 TITLE: _____ 22 NAME: _____ 23 STREET ADDRESS: _____ 24 CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/> DELETE	31 TITLE: _____ 32 NAME: _____ 33 STREET ADDRESS: _____ 34 CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/> DELETE	41 TITLE: _____ 42 NAME: _____ 43 STREET ADDRESS: _____ 44 CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/> DELETE	51 TITLE: _____ 52 NAME: _____ 53 STREET ADDRESS: _____ 54 CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	<input type="checkbox"/> DELETE	61 TITLE: _____ 62 NAME: _____ 63 STREET ADDRESS: _____ 64 CITY-STATE-ZIP: _____	<input type="checkbox"/> Change <input type="checkbox"/> Addition

**333 DENISON STR #10
MARKHAM ON L3A 224**

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: *[Signature]* **RICHARD CARSON** FEB 7/96 (905) 475-4221

CR2E034 (12/95)