

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 08 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000012733 (0)

1. Corporation Name

CANADIAN PRODUCTS CO., INC.



Principal Place of Business

10558 NW 26 ST
SUITE D-101
MIAMI FL 33172

Mailing Address

10558 NW 26 ST
SUITE D-101
MIAMI FL 33172-2161

3. Date Incorporated or Qualified

02/17/1993

3a. Date of Last Report

07/08/1996

2. Principal Place of Business

21 2043 NW 87 Avenue

Suite, Apt. #, etc.

22

City & State

23 Miami, Fla.

Zip

24 33172

Country

25 US

2a. Mailing Address

26 2043 NW 87 Avenue

Suite, Apt. #, etc.

27

City & State

28 Miami, Fla.

Zip

29 33172

Country

30 US

4. FEI Number

65-0387359

Applied For

Not Applicable

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

9. Name and Address of Current Registered Agent

AZEL, JORSE
10558 NW 26TH ST.
STE. D-101
MIAMI FL 33172

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
AZEL, JORGE
STREET ADDRESS
10558 NW 26TH ST., STE. 101
CITY-ST-ZIP
MIAMI FL

TITLE ☐ DELETE

NAME
AZEL, JORGE J
STREET ADDRESS
10558 NW 26TH ST., STE. 101
CITY-ST-ZIP
MIAMI FL

TITLE ☐ DELETE

NAME
FERENCZI, EDWARD J
STREET ADDRESS
10558 NW 26TH ST. STE. 101
CITY-ST-ZIP
MIAMI FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
2043 NW 87 Avenue
1.4 CITY-ST-ZIP
Miami, Fla. 33172

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2043 NW 87 Avenue
2.4 CITY-ST-ZIP
Miami, Fla. 33172

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
2043 NW 87 Avenue
3.4 CITY-ST-ZIP
Miami, Fla. 33172

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/97
Date

Daytime Phone #

0232734

CR2E034 (9/96)