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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000014325 (3)

ARLIT AMERICAN, INC.

FILED Apr 14 1998 8:00am Secretary of State



Ρ	rincipal Place of Business	Mailing Addre	Mailing Address			a samenwar erd samen erige ditter dater dater Batte batte einet diffe etriå tellat firtt falle.			
1255 LAIRD BLVD. SUITE 365 TOWN OF MT. ROYAL. OUEBEC H3P 2T1 CANADA		1255 LAIRD BLVD. SUITE 365 TOWN OF MT. ROYAL. QUEBEC H3P 2T1 CANADA			· 2T1	DO NOT WRITE IN THIS SPACE			
					nu =	Date Incorporated or Qualified 02/18/1993			
2. Principal Place of Business		2a. Mailing Ad	a. Mailing Address			4. FEI Number	Applied For		
21		26	26			65-0397308 Not Applica			
22	Suite, Apt. #, etc.	Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
23		City & Stat	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
24		Zip 29	30	untry	,	8. This corporation owes or has paid the curre Personal Property Tax due June 30.	ent year Intangible Yes \ \ No		
	9, Name and Address of Curre	nt Registered Agen		10. Name and Address of New Registered Agent					
	COOKE, BRIAN J 222 LAKEVIEW AVE.			81	Name				
SUITE 280					82 Street Address (P.O. Box Number is Not Acceptable)				
					3				
				84	City	FI	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 DIRECTOR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR							
TITLE	DST	☐ DELETE	1.1 TITLE	☐ Change							
NAME	LITVACK, RICHARD		1.2 NAME								
STREET ADDRESS	3577 ATWATER AVE, #1109		1.3 STREET ADDRESS								
CITY-ST-ZIP	MONTREAL PQ		1.4 CITY-ST-ZIP								
TITLE	DP	DELETE	2.1 TITLE	☐ Change	☐ Addition						
NAME	LITVACK, RUTH		2.2 NAME								
STREET ADDRESS	3577 ATWATER AVE, #1109		2.3 STREET ADDRESS								
CITY-ST-ZIP	MONTREAL PO		2. 4 CITY-ST-ZIP								
TITLE		DELETE	3.1 TITLE	☐ Change	Addition						
NAME			3.2 NAME								
STREET ADDRESS			3.3 STREET ADDRESS								
CITY-ST-ZIP			3.4. CITY-ST-ZIP								
TITLE		☐ DELETE	4.1 TITLE	☐ Change	☐ Addition						
NAME			4. 2 NAME								
STREET ADDRESS			4.3 STREET ADDRESS								
CITY-ST-ZIP			4.4 CITY-ST-ZIP								
TITLE		☐ DELETE	5.1 TITLE	☐ Change	Addition						
NAME			5.2 NAME								
STREET ADDRESS			5.3 STREET ADDRESS								
CITY-ST-ZIP			5.4 CITY - ST - 2IP								
TITLE		DELETE	6.1 TITLE	☐ Change	Addition						
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET ADDRESS		[
CITY-ST-ZIP			6.4 CITY-ST-ZIP								

14. 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 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 altachment with an address.

SIGNATURE:

Kull Ltul

RICHARD LITUACIC

April 3/98

514-731-9319

(2E034 (10/97)