2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000059321

Entity Name: SKY SERVICE LIFEGUARD, INC.

FILED Apr 26, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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BANK OF AMERICA CITY CENTRE 1521 ALTON ROAD 290

401 EAST LAS OLAS BLVD. # 130-140

FORT LAUDERDALE, FL 33301 MIAMI BEACH, FL 33139 US

Current Mailing Address: New Mailing Address:

9785 RYAN AVENUE, LEGAL DEPT. 9785 RYAN AV

DORVAL ONTARIO H9P1A2 ATTN LEGAL DEPARTMENT CANADA, DORVAL,, QC H9P1A2

FEI Number: 65-0443658 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

EWING, DAVID EWING, DAVID BANK OF AMERICA CITY CENTRE 1521 ALTON ROAD

401 EAST LAS OLAS BLVD. # 130-140 290

FORT LAUDERDALE, FL 33301 US MIAMI BEACH, FL 33139 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: 04/26/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

MC MURRAY, SID Name: Name: CASGRAIN, TIM 6120 MIDFIELD ROAD 6120 MIDFIELD ROAD Address: Address:

City-St-Zip: MISSISSSAUGA,, ON L4W 2P7 CA City-St-Zip: MISSISSSAUGA,, ON L5P 1B1 CA

DΡ Title: D/P Title: () Delete (X) Change () Addition

Name: RUSSELL, PAYSON Name: RUSSELL, PAYSON 6120 MIDFIELD ROAD 6120 MIDFIELD ROAD Address: Address:

MISSISSAUGA, ON L4W 2P7 CA MISSISSAUGA, ON L5P 1B1 CA City-St-Zip: City-St-Zip:

(X) Change () Addition Title: CD () Delete Title: CASGRAIN, TIM DUFF-CARON, CATHERINE Name: Name: 6120 MIDFIELD ROAD 9785 RYAN AVENUE Address Address:

City-St-Zip: MISSISSAUGA, ON L4W 2P7 CA City-St-Zip: DORVAL, QC H9P 1A2 CA

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

DUFF-CARON, CATHERINE Name: Name: Address: 6120 MIDFIELD ROAD Address: City-St-Zip: MISSISSAUGA, ON L4W 2P7 CA City-St-Zip:

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

WATSON, BILL Name: Name: 6120 MIDFIELD ROAD Address: Address: MISSISSAUGA, ON L4W2P7 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CATHERINE DUFF-CARON S 04/26/2006