FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
1995 MAY -1 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000088056 (5)

1 Corporation Name
PYRAMIDS UNLIMITED, INC.

Principal Place of Business	Mailing Address
750 WEST PENDER ST. SUITE 1005 VANCOUVER, CA. V6C2T8	750 WEST PENDER ST. SUITE 1005 VANCOUVER, CA. V6C2T8

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
24 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 12/20/1993
3a. Date of Last Report: 08/26/1994
4. FEI Number: 65-0482203 ☐ 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

WILLIS, JAMES E
4501 TAMIAMI TRAIL N
SUITE 400
NAPLES FL 33940

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

000014929150
-05/18/95--01011--023
****225.00 ****225.00

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 and/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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☐ Change ☐ Addition
NAME	SHAUGHNESSY, BRIAN W	12 NAME	
STREET ADDRESS	1155 15TH ST SW SUITE 502	13 STREET ADDRESS	
CITY-ST-ZIP	WASHINGTON DC 20005	14 CITY-ST-ZIP	
TITLE	D	21 TITLE	☐ Change ☐ Addition
NAME	HAMILTON, JOHN N	22 NAME	
STREET ADDRESS	~~2744 PAGENT CIR~~	23 STREET ADDRESS	1005 - 750 WEST PENDER ST.
CITY-ST-ZIP	~~NAPLES FL 33962-4207~~	24 CITY-ST-ZIP	VANCOUVER, B.C. CANADA V6C 2T8
TITLE		31 TITLE	V ☐ Change ☐ Addition
NAME		32 NAME	BARRY SOUTHARD
STREET ADDRESS		33 STREET ADDRESS	16979 - 9 Roberts Rd.
CITY-ST-ZIP		34 CITY-ST-ZIP	Los Gatos, California 95032
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

2A
5-1-95

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)(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: JOHN N. HAMILTON — April 29, 1995 — (604) 682-4077
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #