- 2002 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nar	IMENT # P9400 INVESTMENTS, INC.	0063702		/		2002 8:0 ary of Sta	
Principal Place of Business 2201 NW 30TH PLACE SUITE 1600 TORONTO. ONTARIO CANADA M4R -2H1		Mailing Address 3099 EAST COMMERCIAL BLVD. SUITE 200 FORT LAUDERDALE FL 33308					1 21 110 1101 1701
2. Principal I	Place of Business	3. Mailing Address			1 0 1 0 1 1 1 1 1 1	1111 66 111 55 11 1 4 11 5 1111 1 15	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & State		City & State			4. FEI Number NOT APPLICABLE Applied For		
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 Add	
	6. Name and Address of Current F	Registered Agent		<u> </u>	7. Name and Address of New F	Fee Require	eu
			Na	ame			
GOREN, SAMUEL S 3099 E. COMMERCIAL BLVD. SUITE 200				Street Address (P.O. Box Number is Not Acceptable)			
	ERDALE FL 33308	City		ty	·	FL Zip Cod	ie
8. The above	named entity submits this statement for	the purpose of changing its	s registered off	ice or registered	agent, or both, in the State of Flo	orida.	<u> </u>
SIGNATURE .				<u>.</u>			
	Signature, typed or printed name of registered agent ar			t signature required wh	en reinstating)	DATE	
 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) 		FILE NOW!!! FEE IS \$150. After May 1, 2002 Fee will be \$ Make Check Payable to Departmen		oe \$550.00	10. Election Campaign Fir Trust Fund Contributio		0 May Be I to Fees
11.	OFFICERS AND D		12.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTSD GREEN, DAVID Y C/O 20 EGLINTON AVENUE WEST TORONTO CANADA	☐ Delete	TITLE NAME STREET ADDI	RESS		☐ Change	Addition
TITLE NAME	TOTOTTO CAUTOR	☐ Delete	TITLE			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP		•	NAME STREET ADDR	· I			
TITLE NAME		☐ Delete	TITLE			☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDR CITY-ST-ZIP	J			
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ITLE IAME ITREET ADDRESS ITY-ST-ZIP	,	☐ Delete	TITLE NAME STREET ADDR	ESS		☐ Change	Addition
of the corn	ertify that the information supplied with the on this report or supplemental report is the protection or the receiver or trustee empower on an artachment with an address	ered to execute this report a labeller like empowered.		Chapter 607, Flo			

DAVID GREEN
DIRECTOR
PED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: