

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000074886 (9)

1. Corporation Name

MASTERMARK PEWTER (NAPLES), INC.

FILED

95 DEC 20 PM 1:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

Mailing Address

36 FIFESHIRE CRESCENT
NEPEAN, ONT., K2E 7G8 CANADA
OC

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NEPEAN, ONT., K2E 7G8 CANADA
OC

3. Date Incorporated or Qualified
09/27/1995

3a. Date of Last Report

4. FEI Number

☒ 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

6. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

81 Name J.D. WRIGHT c/o MEADOWS LEARNING
82 Street Address (P.O. Box Number is Not Acceptable)
5023 RINGWOOD MEADOW
83
84 City SARASOTA FL 85 Zip Code 34235

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

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

(NOTE: Registered Agent signature required when changing)

August 1/96
Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PRESIDENT / DIRECTOR ☐ DELETE
NAME E.Y. PEDDIE
STREET ADDRESS 2531 KILDONAN AVE
CITY-ST-ZIP OTTAWA ONTARIO CAN K2B 7L1

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE SEC. TREASURER / DIRECTOR ☐ DELETE
NAME I. PEDDIE
STREET ADDRESS 2531 KILDONAN AVE
CITY-ST-ZIP OTTAWA ONTARIO CAN K2B 7L1

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DIRECTOR ☐ DELETE
NAME B.C. WRIGHT
STREET ADDRESS 36 FIFESHIRE CRES
CITY-ST-ZIP NEPEAN ONTARIO CAN

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE DIRECTOR ☐ DELETE
NAME J.D. WRIGHT
STREET ADDRESS 36 FIFESHIRE CRES
CITY-ST-ZIP NEPEAN, ONTARIO, CAN.

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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)(k), 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:

J. Wright J. WRIGHT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug 1/96
Date

613-225-5540
Telephone Number

CR2E034 (12/95)