


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**May 20, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P95000079774  
 1. Entity Name  
 SUNFLO EQUIPMENT, INC.



Principal Place of Business: 10185 COLLINS AVE, 1518, BAL HARBOUR, FL 33154 US  
 Mailing Address: % LIANNE J. MOORE, 2565 SHETLAND PARK, ST. LAZARE, QUEBEC, CANADA, J7T -2B1



05182005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number: 98-0158924 Applied For / Not Applicable  
 5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 PERLOW, JEFFREY M  
 1820 E. HALLANDALE BEACH BLVD.  
 HALLANDALE, FL 33009

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MOORE, LIANNE J
STREET ADDRESS	2565 SHETLAND PARK, ST. LAZARE
CITY - ST - ZIP	QUEBEC CANADA, J7T 2B1
TITLE	V
NAME	MOORE, RICHARD W
STREET ADDRESS	1225 ROCKLAND
CITY - ST - ZIP	MT ROYAL QUEBEC, CANADA, H3P 2X9
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 05/20/05-80002-001 150.00

**DO NOT WRITE IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] DATE: May 18/05 DAYTIME PHONE #: 514 838 4984