

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Apr 30 1997 8:00am  
Secretary of State

DOCUMENT # P96000004345 (0)

1. Corporation Name

GREG-SON INTERNATIONAL, INC.

Principal Place of Business

800 CORPORATE DRIVE  
SUITE 602  
FORT LAUDERDALE FL 33334

Mailing Address

800 CORPORATE DRIVE  
SUITE 602  
FORT LAUDERDALE FL 33334-3621

2. Principal Place of Business

660 BERTRAND ST.

Suite, Apt. #, etc.

City & State

S. LAURENT MONTREAL

Zip

H4M1V8

Country

CANADA

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

3b. Date of Last Report

1ST TIME

3. Date Incorporated or Qualified

01/12/1996

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

7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

NADEL, HOWARD B

800 CORPORATE DRIVE

SUITE 602

FORT LAUDERDALE FL 33334

10. Name and Address of New Registered Agent

81 Name

MINDY L. PALLOT

82 Street Address (P.O. Box Number is Not Acceptable)

801 BRICKMAN AVE SUITE 1501

83 City

MIAMI FLORIDA

84 City

FL

85 Zip Code

33131

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

Mindy L. Pallo

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

4/21/97

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 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

Greg Mithelman

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

April 15/97

DAYTIME PHONE

1-514-953-9363

0200016

CR2E034 (9/96)