

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P96000038926**

1. Entity Name

BID.COM USA, INC.FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAR -6 PM 1:05

Principal Place of Business

Mailing Address

270 NORTH ROCKY POINT DRIVE
SUITE 510
TAMPA FL 33601
US6725 AIRPORT RD
STE 201
MISSISSAUGA ON L4V 1V2
US

2. Principal Place of Business

3. Mailing Address

2701 NORTH ROCKY POINT DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 930

City & State

City & State

Zip

Country

Zip

Country

33607**CANADA**

4. FEI Number

59-3376739

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HIGBEE, R A
501 EAST KENNEDY BLVD.
SUITE 1700
TAMPA FL 33602

Name

CORPORATION SERVICE COMPANY

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

1201 NAYS STREET

City

TALLAHASSEE

FL

Zip Code

32301-2525

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.

SIGNATURE

BRIAN COURTNEY, ASST. VP

DATE

3/6/01

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

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
CD	GODIN, PAUL	2701 NORTH ROCKY POINT DRIVE, STE. 510	TAMPA FL 33609-1013	<input checked="" type="checkbox"/>
PTD	LYMBURNER, JEFF	2701 NORTH ROCKY POINT DRIVE, STE. 510	TAMPA FL 33609-1013	<input type="checkbox"/>
S	BOWES, BRENT	2701 NORTH ROCKY POINT DRIVE, STE. 510	TAMPA FL 33609-1013	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
CHAIRMAN, PRESIDENT & CEO				<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
CHIEF OPERATING OFFICER	MARK WALLACE	6725 AIRPORT ROAD, SUITE 201	MISSISSAUGA, ONTARIO L4V 1V2	<input type="checkbox"/>	<input checked="" type="checkbox"/>
PRESIDENT, BID.COM TECHNOLOGY GROUP	JIM MOSKOS	6725 AIRPORT ROAD, SUITE 201	MISSISSAUGA, ONTARIO L4V 1V2	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VP, GENERAL COUNSEL & SECRETARY	JOHN MACKIE	6725 AIRPORT ROAD, SUITE 201	MISSISSAUGA, ONTARIO L4V 1V2	<input type="checkbox"/>	<input checked="" type="checkbox"/>

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FEBRUARY 9, 2001

Date

813-636-8205

Daytime Phone #

CR2E034 (10/00)

AD