

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 17, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000073140

1. Entity Name
PENTARES, INC.



Principal Place of Business
400 ROCK CHAPEL ROAD RR #2
DUNDAS ONTARIO CANADA
L9H 5E3, XX

Mailing Address
400 ROCK CHAPEL ROAD RR #2
DUNDAS ONTARIO CANADA
L9H 5E3, XX



07072006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3411188	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

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 NAME STREET ADDRESS CITY-ST-ZIP	DAS BUIE, EDITH 1575 MILITARY RD #342 NIAGARA FALLS, NY 143041745
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BUIE, MICHAEL 1575 MILITARY RD. #342 NIAGARA FALLS, NY 143041745
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BUIE, LYSIANNE 1575 MILITARY RD. #342 NIAGARA FALLS, NY 143041745
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07/18/06-80012-005 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Edith Buie
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 7, 2006 (905) 689-7384
Date Daytime Phone #