PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999

DOCUMENT # P98000029914

1. Corporation Name

SCOTIA DIRECT INC.

Principal Place of Business

1105 OLD GRIFFIN RD

Mailing Address

1105 OLD GRIFFIN RD

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90021 023 ***150.00



DANIA FL 3300	DANIA FL 33004			DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed			
					04/01/1998			
,	lace of Business	2a. Mailing Address		. 0	4. FEI Number		oplied For	
21 1103	old Griffin Rom		riffi	N Rot	65-0824580		ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5: Certifcate of Status Desired	\$8.75 / Fee Re	Additional equired	
City & State		City & State	logi	DA	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added		
Zip	Country	Zip	Country		8. This corporation owes the current year Inta	angible □ Yes	½] _{No}	
<u> 24 330</u>	04 25 BROWARD		<u> </u>	MARE			261 NO	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Registered	- Againt		
DALI	LAIRE, JEAN-PIERRE				Fernand Lamothe			
1105 OLD GRIFFIN RD				82 Street Address (P.O. Box Number is Not Acceptable) 721 S.E. 17Th Street				
DANIA FL 33004								
			83		Fort Lauderdale			
			84	City	· FL	. 1 133	Code 316	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508 Florida Statutes	, the above	-named cor	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appoin	changing its	registered	
office or n	egistered agent, or both, in the State of	Florida. Such change was auth	norized by	the corporat	tion's board of directors. I hereby accept the appoir	itment as re	gistered	
	+AIMan 1	Tun Ha	La Cialotto		01-08-99			
SIGNATURE			egistered Agent	t signature requir	red when reinstating) DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	Ō	X DELETE	1.1 TITLE			Change	☐ Addition	
NAME	DALLAIRE, JEAN-PIERRE		1.2 NAME					
STREET ADDRESS	1105 OLD GRIFFIN RD		1.3 STREET	ADDRESS				
CITY-ST-ZIP	DANIA FL 33004	V-	1.4 CITY-ST	-ZIP				
TITLÉ	D	X DELETE	2.1 TITLE			Change	☐ Addition	
NAME	LAFLEUR, PIERRE		2.2 NAME					
STREET ADDRESS	1105 OLD GRIFFIN RD		2.3 STREET	ADDRESS	•			
CITY-ST-ZIP	DANIA FL 33004		2. 4 CITY-S	T-ZIP	KES: DENT	Change	[]-Addition	
TITLE	D D	☐ DELETE	3.1 TITLE	'	Legresly, Raymond, Glau	để "	Pres	
NAME	RAYMOND, CLAUDE		3.2 NAME	- 1	ll03 Old Griffin Road			
STREET ADDRESS	1105 OLD GRIFFIN RD		3.3 STREET		Dania, Florida 33304			
CITY-ST-ZIP	DANIA FL 33004	☐ DELETE	3.4. CITY-S' 4.1 TITLE	T-ZIP	SECRETARY	Change	Addition	
TITLE		DELETE			Lebreux, Carole Sec.	4a.	A I IIII	
NAME		*	4,2 NAME 4,3 STREET	ADDRESS	1103 Old Griffin Road			
STREET ADDRESS			4.4 CITY- ST		Dania, Florida 33304			
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	- 211		Change	Addition	
NAME		_	5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-S1	r- ZIP	•			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition	
NAME	,		6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY-ST-ZIP			6.4 CITY- ST	-ZIP				

14. 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 annual report or supplemental annual teport 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 attaction of the corporation of the receiver of

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-08-99

954-925-8888

CR2E034 (11/98)