

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 15, 2001 8:00 am
Secretary of State

06-15-2001 90171 030 ***558.75

DOCUMENT # **P980000045234**

1. Entity Name

INTERNET LIQUIDATORS USA? INC.

Principal Place of Business
 2701N Rocky Point Dr.
 Suite 930
 Tampa, FL 33607

Mailing Address
 6725 Airport Rd.
 Suite 201
 Mississauga, ON L4V1V2

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional
 Fee Required

Applied For
☒ Not Applicable

DO NOT WRITE IN THIS SPACE

A0073471

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Corporation Service Company
 1201 Hays Street
 Tallahassee, FL 32301-2525

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

DCC
 Godin, Paul
 175 Lloyds Lane, RR#2
 Kettleby, ON L4L 1Z6 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

DPT
 Lymburner, Jeff
 1389 Briar Grove Rd.
 Oldsmar, FL 34677 ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

D/C/P/CEO
 2701N Rocky Point Dr., Suite 930
 Tampa, FL 33607 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

S
 Bowes, Brent
 4966 Rosebush Road
 Mississauga, ON L5M 5M8 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

COO
 Wallace, Mark
 6725 Airport Rd., Suite 201
 Mississauga, ON L4V 1V2 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

P, Bid.Com Technology
 Moskos, Jim
 6725 Airport Rd., Suite 201
 Mississauga, ON L4V 1V2 ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

V/S/General Counsel
 Mackie, John
 6725 Airport Rd., Suite 201
 Mississauga, ON L4V 1V2 ☐ Change ☒ Addition

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

JOHN MACKIE

MAY 31/01

Date

905-672-7467 Ext.321

Deputy Phone

CR2E034 (11/00)