

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 16, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P98000063239

1. Entity Name

BDGATE, INC



Principal Place of Business

2875 N.E. 191ST STREET  
SUITE 404  
AVENTURA FL 33180

Mailing Address

2875 N.E. 191ST STREET  
SUITE 404  
AVENTURA FL 33180

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E034 (10/04)

4. FEI Number 65-0854120

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

REINHARD, SANFORD N  
2875 N.E. 191ST STREET  
SUITE 404  
AVENTURA FL 33180

7. Name and Address of New Registered Agent

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. 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**  
**After May 1, 2005 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees  
Trust Fund Contribution ☐

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete  
NAME GOLDLIST, BARRY DAVID  
STREET ADDRESS 123 DEWBOORNE AVE  
CITY- ST- ZIP TORONTO, ONT CA m6-c1y6

TITLE VP ☐ Delete  
NAME GOLDLIST, RENEE  
STREET ADDRESS 123 DEWBOORNE AVE  
CITY- ST- ZIP TORONTO, ONT CA m6-c1y6

TITLE S ☐ Delete  
NAME GOLDLIST, PAUL  
STREET ADDRESS 123 DEWBOORNE AVE  
CITY- ST- ZIP TORONTO, ONT CA m6-c1y6

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 000000309603  
CITY- ST- ZIP 04/16/05-80044-008 150.00

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

12. 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 10 or Block 11 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

B.D. GOLDLIST - DIR.

Feb 9, 2005

416-823-7999