

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000101320

1. Entity Name
PRIDDIS, INC.

FILED
00 OCT 20 PM 1:41
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business Mailing Address
170 Wilkinson Road, Unit 18
Brampton, Ontario
Canada L6T 2Z5

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number Applied For
59-3560766 Not Applicable

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

6. Name and Address of Current Registered Agent
Frederick J. Potter
801 Sunset Drive
Melbourne, FL 32935

7. Name and Address of New Registered Agent
Name Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Hays Street
City Tallahassee FL Zip Code 32301

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 Please see attached signature page 10/19/2000
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, 2000 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		
TITLE	P, S, T, D	<input checked="" type="checkbox"/> Delete
NAME	Frederick J. Potter	
STREET ADDRESS	801 Sunset Drive	
CITY - ST - ZIP	Melbourne, FL 32935	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Barry Markwick	
STREET ADDRESS	2799 Busland Crescent	
CITY - ST - ZIP	Mississauga, Ontario Canada L6J 1Y1	
TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Christopher Rich	
STREET ADDRESS	84 Duggan Avenue	
CITY - ST - ZIP	Toronto, Ontario Canada M4V 1Y2	
TITLE	V-P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	John Kavanagh	
STREET ADDRESS	4776 Distribution Drive	
CITY - ST - ZIP	Tampa, FL 33605	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE	TS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

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: Please see attached signature page 10/18/2000 905-459-0466
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT #** P98000101320

1. Entity Name

PRIDDIS, INC.

Principal Place of Business

Mailing Address

170 Wilkinson Road, Unit 18
Brampton, Ontario
Canada L6T 2Z5

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

59-3560766

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Frederick J. Potter
801 Sunset Drive
Melbourne, FL. 32935Name
Corporation Service CompanyStreet Address (P.O. Box Number is Not Acceptable)
1201 Hays Street

City Tallahassee

FL

Zip Code
32301

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.

BRIAN COURTNEY, ASST. VP.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

10/19/2000

FILE NOW!!! FEE IS \$50.00**Make Check Payable to Department of State**

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY - ST - ZIP	Frederick J. Potter 801 Sunset Drive Melbourne, FL. 32935	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Barry Markwick, Director 2799 Busland Crescent Mississauga, Ontario Canada L6J 1Y1	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Christopher Rich, President 84 Duggan Avenue Toronto, Ontario Canada M4V 1Y2	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	John Kavanagh, V-P 4776 Distribution Drive Tampa, FL. 33605	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

BARRY J. MARKWICK

Date

Oct. 18, 2000

Daytime Phone #

(905)
459-0466



ACCOUNT NO. : 072100000032

REFERENCE : 865313 4340573

AUTHORIZATION :

Patricia Pijet

COST LIMIT : \$ 61.25

ORDER DATE : October 16, 2000

ORDER TIME : 11:27 AM

ORDER NO. : 865313

CUSTOMER NO: 4340573

CUSTOMER: Mr. Allan G. Beach
Fasken Martineau Dumoulin LLP
Toronto-dominion Bank Tower
Box 20 Ste 4200, Toronto D Ctr
Toronto, ON M5K 1N6

CHANGE OF AGENT
AMENDED ANNUAL REPORT

NAME: PRIDDIS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom