

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005 8:00 am
Secretary of State

04-26-2005 90148 028 ***150.00

DOCUMENT # P99000021636

1. Entity Name
CAN-AM IMMIGRATION SERVICES INC.



40066340

Principal Place of Business
**3223 NW 10TH TERRACE, STE 610
FORT LAUDERDALE, FL 33309**

Mailing Address
**3223 NW 10TH TERRACE, STE 610
FORT LAUDERDALE, FL 33309 CA**

2. Principal Place of Business 3. Mailing Address

Suite, Apt #, etc Suite, Apt # etc

City & State City & State

Zip Country Zip Country

04182005 Chg-P CR2E034 (10/03)

4. FEI Number
65-0901124

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PARENTEAU, RICHARD SR
3223 NW 10TH TERRACE, STE 610
FORT LAUDERDALE, FL 33309**

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**

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DPS** ☒ Delete
NAME **PARENTEAU, RICHARD JR**
STREET ADDRESS **3223 NW 10TH TERRACE, STE 610**
CITY- ST- ZIP **FORT LAUDERDALE, FL 33309**

TITLE **DPS** ☒ Change ☐ Addition
NAME **PARENTEAU, RICHARD SR**
STREET ADDRESS **3223 NW 10TH TERRACE, STE 610**
CITY- ST- ZIP **FORT LAUDERDALE, FL 33309**

TITLE ☐ Delete
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STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
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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 reports 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

Richard Parenteau Sr, President

April 19, 2005 - Tel.: 1-800-613-0656

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone