


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2005 08:00 AM
Secretary of State

DOCUMENT # S19322 1. Entity Name SNOW BIRD DEVELOPMENTS, INC.	
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Principal Place of Business 87 LAKE STREET GRIMSBY, ON L3M2G-6 CA	Mailing Address 87 LAKE ST. GRIMSBY, ON L3M2G-6 CA
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04052005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 98-0115252	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

ZMENAK, CAROLE
5455 JAEGER RD
NAPLES, FL 34109

**DO NOT WRITE
IN THIS SPACE**

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

TITLE	D
NAME	ZMENAK, CAROLE
STREET ADDRESS	87 LAKE ST
CITY-ST-ZIP	GRIMSBY, ON L3M 2G6
TITLE	D
NAME	ZMENAK, EMIL SR
STREET ADDRESS	87 LAKE ST
CITY-ST-ZIP	GRIMSBY, ON L3M 2G6
TITLE	D
NAME	ZMENAK, EMIL JR.
STREET ADDRESS	87 LAKE ST
CITY-ST-ZIP	GRIMSBY, ON L3M 2G6
TITLE	D
NAME	ZMENAK, DONNA L
STREET ADDRESS	25 MARGARET ST
CITY-ST-ZIP	GRIMSBY, ON L3M 4P2
TITLE	D
NAME	ZMENAK, SUZANNE
STREET ADDRESS	87 LAKE ST
CITY-ST-ZIP	GRIMSBY, ON L3M 2G6
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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04/20/05-80042-022 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

Date

Daytime Phone #

Carole Zmenak
Apr 14/05 905-945-9050