

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S55988

FILED
Feb 25, 2004
Secretary of State

Entity Name: FIRST FLORIDA ECHO INC.

Current Principal Place of Business:

279 KING STREET WEST, PO BOX 276
SUITE 201
KITCHENER, ON N2G 3X9 CA

New Principal Place of Business:

Current Mailing Address:

279 KING STREET WEEST, PO BOX 276
SUITE 201
KITCHENER, ON N2G 3X9 CA

New Mailing Address:

FEI Number: 59-3099775

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FISHER & SAULS, P.A.
100 SECOND AVENUE SOUTH
SUITE 701
ST. PETERSBURG, FL 33701 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: MOTZ, PAUL J
Address: 57 HEINS AVENUE
City-St-Zip: KITCHENER, ON N2G 1Z7 CA

Title: S (X) Delete
Name: AYERS, CAROL A
Address: 564 WILLOW WOOD DR
City-St-Zip: WATERLOO, ON N2T 2T5 CA

Title: P (X) Delete
Name: FLEMING, TIMOTHY M
Address: 139 DUNBAR ROAD SOUTH
City-St-Zip: WATERLOO, ON N2L 2E8 CA

Title: V () Delete
Name: JAMES, SHERI A
Address: 57 GARDENVALE ROAD
City-St-Zip: TORONTO, ON M8Z 4C2 CA

Title: D () Delete
Name: BRADLEY, ANN
Address: RR # 3
City-St-Zip: BRESLAU, ON N0B 1M0 CA

Title: D () Delete
Name: MOTZ, MARGARET
Address: UNIT 40 - 210 HIGL+HLAND CRESCENT
City-St-Zip: KITCHENER, ON N2M 5H9 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CDP (X) Change () Addition
Name: MOTZ, PAUL J
Address: 57 HEINS AVENUE
City-St-Zip: KITCHENER, ON N2G 1Z7 CA

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: JAMES, SHERI A
Address: 57 GARDENVALE ROAD
City-St-Zip: TORONTO, ON M8Z 4C2 CA

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MOTZ, MARGARET
Address: UNIT 40 - 210 HIGHLAND CRESCENT
City-St-Zip: KITCHENER, ON N2M 5H9 CA

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERI A. JAMES

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02/25/2004

Electronic Signature of Signing Officer or Director

Date