

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S69454** (4)

1. Corporation Name

TRI-B FLORIDA INC.

Principal Place of Business

**ONE YORKDALE ROAD, SUITE 510
NORTH YORK, ONTARIO M6A 3A1
CANADA**

Mailing Address

**ONE YORKDALE ROAD, SUITE 510
NORTH YORK, ONTARIO M6A 3A1
CANADA**



3. Date Incorporated or Qualified
07/30/1991

3a. Date of Last Report
02/16/1995

4. FEI Number

98-0120555

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21. Suite, Apt. #, etc.
225 S. Westmonte Drive

22. City & State
Suite 3020

23. Zip
Altamonte Springs, FL

24. Country
25. 32714 30.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FRANK MOENULTY-
225 S. WESTMONTE DR. SUITE 3020
ALTAMONTE SPRINGS, FL 32714**

81. Name
DAVID W. HALL

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0505 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of Corporation or Registered Agent (Not Applicable)

DAVID W. HALL

(NOTE: Registered Agent signature required when reinstating)

DATE

2/6/96

12. OFFICERS AND DIRECTORS

12.1 TITLE
PD ☐ DELETE
12.2 NAME
SLIVER, SHOEL
12.3 STREET ADDRESS
1 YORKDALE RD #510
12.4 CITY-STATE-ZIP
N.YORK, ONT., CANADA

12.5 TITLE
VSD ☐ DELETE
12.6 NAME
COOPER, BERNARD
12.7 STREET ADDRESS
1 YORKDALE RD #510
12.8 CITY-STATE-ZIP
N.YORK, ONT., CANADA

12.9 TITLE
T ☐ DELETE
12.10 NAME
COOPER, BERNARD
12.11 STREET ADDRESS
1 YORKDALE RD #510
12.12 CITY-STATE-ZIP
N.YORK, ONT., CANADA

12.13 TITLE
☐ DELETE
12.14 NAME
☐ DELETE
12.15 STREET ADDRESS
☐ DELETE
12.16 CITY-STATE-ZIP
☐ DELETE

12.17 TITLE
☐ DELETE
12.18 NAME
☐ DELETE
12.19 STREET ADDRESS
☐ DELETE
12.20 CITY-STATE-ZIP
☐ DELETE

12.21 TITLE
☐ DELETE
12.22 NAME
☐ DELETE
12.23 STREET ADDRESS
☐ DELETE
12.24 CITY-STATE-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE
PSD ☒ Change ☐ Addition

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-STATE-ZIP

13.5 TITLE
VD ☒ Change ☐ Addition

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY-STATE-ZIP

13.9 TITLE
☐ Change ☐ Addition

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY-STATE-ZIP

13.13 TITLE
Asst. Secretary ☐ Change ☒ Addition

13.14 NAME
LAWRENCE LUBIN

13.15 STREET ADDRESS
333 Banbury Road

13.16 CITY-STATE-ZIP
North York, Ontario M2L 2V2 Canada

13.17 TITLE
☐ Change ☐ Addition

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY-STATE-ZIP

13.21 TITLE
☐ Change ☐ Addition

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/96

Date

407-865-5444

Daytime Phone #

CR2E034 (12/95)