FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

• PROFIT
CORPORATION
ANNUAL REPORT
1996

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

FILED
Apr 02 1996 8:00 am
Secretary of State

DOCUMENT # **S95685** **(1)**

1. Corporation Name

SEMINOLE INVESTMENTS, INC.

Principal Place of Business

2581 JOHN STR
STE 1
MARKHAM ON L6C 1-6
CA

Mailing Address

2581 JOHN STR
STE 1
MARKHAM ON L6C 1-6
CA

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip 24 Country 25

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip 29 Country 30

3. Date Incorporated or Qualified: **11/21/1991**

3a. Date of Last Report: **03/07/1995**

4. FEI Number: **NOT APPLICABLE** 65-0522354 — 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

9. Name and Address of Current Registered Agent

WIENER, DAVID J.
LEVY, KNEEN, BOYES, WIENER, ET AL
1400 CENTREPARK BLVD., SUITE 1000
W. PALM BEACH FL 33401

10. Name and Address of New Registered Agent
81 Name
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 607.0508, 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. The registered office and the registered agent named in this statement are identical to the corporation's business address. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	PRESTON, JOHN W.S.	
STREET ADDRESS	% 1400 CENTREPARK BLVD.	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE	S	☐ DELETE
NAME	GREEN, ROBERT S.	
STREET ADDRESS	% 1400 CENTREPARK BLVD.	
CITY-ST-ZIP	W. PALM BEACH FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	☐ Change ☐ Addition
1. NAME	
1.0 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2. TITLE	☐ Change ☐ Addition
2. NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3. TITLE	☐ Change ☐ Addition
3. NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4. TITLE	☐ Change ☐ Addition
4. NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5. TITLE	☐ Change ☐ Addition
5. NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6. TITLE	☐ Change ☐ Addition
6. NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

CR2E034 (12/95)

14. I do hereby certify that the information supplied 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 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 is listed as the registered agent.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(905)477-9200
Date - Telephone