FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT

STREET ADDRESS

SIGNATURE:

appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 30 1997 8:00am

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State 1997 (5) DOCUMENT # **V42046** DUNDAS HOLDINGS, INC. Principal Place of Business Mailing Address 244 KING ST., WEST 244 KING ST., WEST **DUNDAS. ONTARIO L94 1V9 DUNDAS, ONTARIO L94 1V9** 3. Date Incorporated or Qualified 3a. Date of Last Report 06/05/1992 07/02/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation has liability for intangible tax under s. 199.032, Zφ Country Zφ ☐ Yes 24 25 28 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WILSON, WARREN A. III 31608 US HIGHWAY 19 NORTH **B2** Street Address (P.O. Box Number is Not Acceptable) PALM HARBOR FL 63 84 11. Pursuant to the provisions of Sections 607.0502 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when rainstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE 1.1 TITLE Change Addition TILLE DAVIES, MICHAEL JAMES NAM: 1.2 NAME 152 PLEASANT AVE. STREET ADDRESS 1.3 STREET ADDRESS DUNDAS, ONTARIO L94 3V2 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition STD 2.1 TITLE THLE SORBY, CHRISTOPHER J NAME 2.2 NAME 7 ELIZABETH CT. 2 3 STREET ADDRESS STREET ADDRESS **DUNDAS, ONTARIO L94 3M1** 2 4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition TITLE 31 TITLE MCCUHOCH, AMELIA BROWN NAME 32 NAME **25 SUTER CRESCENT** 3.3 STREET ADDRESS STREET ADDRESS **DUNDAS, ONTARIO L94 6R7** 3.4. CITY - ST - ZIP CITY-\$1-7IP DELETE Change Addition 4.1 TITLE THLE WHITE, KEITH NAME 4.2 NAME 95 SUNRISE CRESCENT STREET ADDRESS 4.3 STREET ADDRESS **DUNDAS, ONTARIO L94 3S1** CITY - ST - ZIP 4.4 CHTY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZIP CITY - ST - 7IP DELETE Addition ☐ Change THE 6.1 TITLE NAM: 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do 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 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