

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90231 042 ***150.00

DOCUMENT # V73524

1. Entity Name
TBF LAKE MARY, INC.



Principal Place of Business
9617 SPRING LAKE DR
CLERMONT, FL 34711 US

Mailing Address
ONE YORKDALE ROAD, SUITE 510
TORONTO, ONTARIO, CANADA
M6A 3A1, XX

400000000



04202007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3154296

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PRATT, JAMES R ESQ.
GRAHAM, CLARK, JONES, BUILDER, PRATT & MARKS
369 N. NEW YORK AVENUE, 3RD FLOOR
WINTER PARK, FL 32789

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	SILVER, SHOEL
STREET ADDRESS	ONE YORKDALE ROAD, STE 510
CITY-ST-ZIP	TORONTO, ONT, CA m6a 3a1
TITLE	DVS
NAME	COOPER, BERNARD
STREET ADDRESS	ONE YORKDALE ROAD, STE 510
CITY-ST-ZIP	TORONTO, ONT, CA m6a 3a1
TITLE	DVS
NAME	LUBIN, LAWRENCE
STREET ADDRESS	ONE YORKDALE ROAD, STE 510
CITY-ST-ZIP	TORONTO, ONT, CA m6a 3a1
TITLE	T
NAME	LUBIN, LAWRENCE
STREET ADDRESS	ONE YORKDALE ROAD, STE 510
CITY-ST-ZIP	TORONTO, ONT, CA m6a 3a1
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

APR 25 2007

416-785-6000

Date Daytime Phone #

LAWRENCE LUBIN