

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000002192

**Entity Name:** 860190 ONTARIO LIMITED INC.

**Current Principal Place of Business:**

1 BEACH DR SE, SUITE 220  
ST. PETERSBURG, FL 33701

**Current Mailing Address:**

1 BEACH DR SE, SUITE 220  
ST. PETERSBURG, FL 33701

**FEI Number:** 98-0692099

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

POSKUS, SUSAN INEZ CPA  
1 BEACH DR SE, SUITE 220  
ST. PETERSBURG, FL 33701 US

*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

**Officer/Director Detail :**

Title            CHRM  
Name            MAIA, NORMAN C  
Address         1 BEACH DR SE, SUITE 220  
City-State-Zip: ST. PETERSBURG FL 33701

Title            PVST  
Name            MAIA, NORMAN C  
Address         1 BEACH DR SE, SUITE 220  
City-State-Zip: ST. PETERSBURG FL 33701

*I hereby 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 all other like empowered.*

**SIGNATURE:** MAIA , NORMAN C

CHRM

04/22/2014

Electronic Signature of Signing Officer/Director Detail

Date