

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 # **P11880 (2)**

1. Corporation Name
590457 ONTARIO LIMITED, "CORPORATION"



Principal Place of Business	Mailing Address
35 SAN PEDRO DR HAMILTON, ONTARIO L8N 1T8 HAMILTON ON L9C 2A CA	35 SAN PEDRO DRIVE HAMILTON, ONTARIO L8N 1T8 HAMILTON ON L9C 2A US

3. Date Incorporated or Qualified 10/22/1986	3a. Date of Last Report 04/24/1995
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2. Principal Place of Business	2a. Mailing Address
21. As above, except Zip	26. As above, except Zip and
Suite, Apt. #, etc.	Suite, Apt. #, etc. country
22. City & State	27. City & State
23. Zip Country	28. Zip Country
24. L9C 2C4	29. L9C 2C4
Country	30. Canada

4. FEI Number 98-0082339	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
SCOTT, JEAN 1000 GULF BLVD. #301 INDIAN ROCKS BEACH FL 34635		81. Name	
		82. Street Address (P.O. Box Number is Not Acceptable)	
		83. City	
		84. City	85. Zip Code
		FL	

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: *Jean Scott* DATE: **4/19/96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCOTT, WALTER, JR.	1.2 NAME	
STREET ADDRESS	38 SENATOR AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	HAMILTON, ONT., CAN.	1.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCORMICK, JOSEPH L.	2.2 NAME	
STREET ADDRESS	35 SAN PEDRO DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	HAMILTON ON	2.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCOTT, JEAN	3.2 NAME	
STREET ADDRESS	1000 GULF BLVD. 301	3.3 STREET ADDRESS	
CITY-ST-ZIP	INDIAN ROCKS BCH. FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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: *J. L. Mc Cormick*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Joseph L. Mc Cormick (secretary)

January 31, 1996 (905) 318-6959
Date: Daytime Phone #

CR2E034 (12/95)