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**Apr 21 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P11880 (2)
1. Corporation Name
590457 ONTARIO LIMITED, "CORPORATION"



Principal Place of Business: 95 SAN PEDRO DR HAMILTON, ONTARIO L8N 1T8 HAMILTON ON L9C 24 Canada

Mailing Address: 95 SAN PEDRO DRIVE HAMILTON, ONTARIO L8N 1T8 HAMILTON ON L9C 2 Canada

3. Date Incorporated or Qualified: 10/22/1986
3a. Date of Last Report: 04/24/1996
4. FEI Number: 98-0082339
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21 As above except Box 25
2a. Mailing Address: 26 As above except Box 25
22. Suite, Apt. #, etc.
23. City & State
24. Zip
25. Country: Canada
27. Suite, Apt. #, etc.
28. City & State
29. Zip
30. Country: Canada

9. Name and Address of Current Registered Agent
SCOTT, JEAN
1000 GULF BLVD. #301
INDIAN ROCKS BEACH FL 34635

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
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: 4/15/97

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	SCOTT, WALTER, JR.	
STREET ADDRESS	38 SENATOR AVENUE	
CITY-ST-ZIP	HAMILTON, ONT., CAN.	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	MCCORMICK, JOSEPH L.	
STREET ADDRESS	35 SAN PEDRO DRIVE	
CITY-ST-ZIP	HAMILTON ON	
TITLE	T	<input type="checkbox"/> DELETE
NAME	SCOTT, JEAN	
STREET ADDRESS	1000 GULF BLVD. 301	
CITY-ST-ZIP	INDIAN ROCKS BCH. FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J.L.M. McCormick Apr. 11, 1997 (405) 318-6959

CR2E034 (9/96)