

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 31, 2000 8:00 am**  
**Secretary of State**

05-31-2000 90045 043 \*\*\*150.00

**DOCUMENT # P96000081656**

1. Entity Name  
**ABLEAUCTIONS.COM! INC.**

Principal Place of Business 688-6 ISHIKAWA FUJISAWA CITY KANAGAWA 252-0815 JAPAN OC	Mailing Address 688-6 ISHIKAWA FUJISAWA CITY KANAGAWA 252-0815 JAPAN OC
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2. Principal Place of Business Suite, Apt. #, etc. <b>1963 LOUGHEED HIGHWAY</b> City & State <b>COQUITLAM, B. C.</b> Zip <b>V3K 3T8</b> Country <b>CANADA</b>	3. Mailing Address Suite, Apt. #, etc. <b>3112 BOUNDARY ROAD</b> City & State <b>BURNABY, B. C.</b> Zip <b>V5M 4A2</b> Country <b>CANADA</b>
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DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3404233** Applied For  Not Applicable

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

**6. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM  
 1200 PINE ISLAND ROAD  
 PLANTATION FL 33324**

**7. Name and Address of New Registered Agent**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
 (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**11. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PSD MCLEOD, DOUG 688-6 ISHIKAWA KANAGAWA 252-0815 JAPAN</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PICED LADHA, ABDUL 8824 YARROW PLACE BURNABY, B.C. CANADA V3N 4W1</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D SLEEMAN, BARRETT P.O. BOX 18111, 2225 W. 41ST AVENUE VANCOUVER, B.C. CANADA V6M 4L3</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SIT DODD, JEREMY 11824 189 B STREET ATT MEADOWS, B.C. CANADA V3Y 2L2</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CFO VELLANI, N.H. (NOSH) 8258 GOVERNMENT ROAD BURNABY, B.C. CANADA V5A 2G3</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V BLEET, JERRY 10871 BROMLEY PLACE RICHMOND, B.C. CANADA V7A 4J6</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V MOOKE, HARLAN 6341 131TH PLACE NE, #62 REDMOND, WA USA 98052</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** ABDUL LADHA **APRIL 20, 2000** (604) 434-3413  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)