PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE **APPLICATION Katherine Harris FOR** FILED Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 01 NOV -8 PM 7: 40 P96000081656 **DOCUMENT #** SECRETARY OF STATE TALLAHASSEE FLORIDA 1. Corporation Name ABLEAUCTIONS.COM, INC. Si Ci 10.

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Principal Place of Business Mailing Address 1963 LOUGHEED HIGHWAY 3112 BOUNDARY-ND 1963 LOUGHEE					HIGHWAY		A. 13865 AIRAI AIRA ACIC 1864	
1963 LOUGHEED HIGHWAY 3112 BOW				1965 LOUGHEEN				
COQUITLAM BC V3K- 3TB BL CA .ed		BURNABY E	BC Y5101- 4A2	COQUITLAM BC		410 10140 0414 00416 00416 00414 00414 10106 404	DE CARLE BUISE SUITE BUILD TOOL	
UA.		.500/		V3K-318		-\ A. (A	\sim	
If above a	ddresses are incorrect in any way, line th	rough incorrect i	nformation and	d enter correction below.		(P)\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	•	
2. New Pri	ncipal Office Address, If Applicable	ng Office Address, If Applicable 4. Date Inco To Do Bu		Date Incorp To Do Busin	porated or Qualified siness in Florida 09/30/1996			
Suite, Apt. #, etc. Suite, Apt.					5 FEIAL	<u> </u>		
		City & State	L0167HE7	ED THIGHWAY	5. FEI Numbe	E0-2404222		
· (C		COQUIT	COQUITLAM , B.		6.	Not Applicable		
Zip Country Zip VSK-		3TS COUNTRY CERTIFICATION		CERTIFICATE	TE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status			
7. Names	and Street Addresses of Each Officer and	l/or Director (Flo	rida nonprofit		st 3 directors)			
Title(s)			Street Address of Each Officer and/or Director		City / State / Zip			
PCD			8824 YARROW PLACE			BURNABY BC V3N		
D	SLEEMAN, BARRETT		PO BOX 1811, 2225 W 44ST AVENUE			VANCOUVER BC V6M		
ST	DODD, JEREMY		11824 189 B STREET			PITT MEADOWS BC V3Y		
CF0	O VELLANI, NII RON, MILLER			VERNMENT-ROAD SPRINGIHILL T	LACE.	BURNABY BC VSA RICHMOND BC VTE IXZ		
-V- BLEET, JERRY			10871 BROMLEY PLACE			-RICHMOND BG V7A-		
D DR. DAVID VOGT			3771 WEST 15th AVENUE			VANCOUVER B.C. VER 227		
				•				
· :	8. Name and Address of Current	Registered Age	ent .	4 8	9. Name and A	Address of New Registered Ag	gent	
	ر المراجع المر	٠.		Name	Name			
CT CORPORATION SYSTEM				Street Address (D	Street Address (P.O. Box Number is Not Acceptable)			
1200 PINE ISLAND ROAD				000047171202				
PLAN	TATION FL 33324		Suite, Apt. #, Etc.		-12/10/010 ****750 00	1096020 ****750.00		
				City State Zip Code			Zip Code	
10. I, being	appointed the registered agent of the ab	ove named corpo	oration, am far	niliar with and accept the ob	ligations of Secti	ion 607.0505, F.S.		
	Please see con	sent for	n attn	ched.				
Signature o Registered	Agent STONES	se p	Hoo	We DED		Date		
nogistered *: -		EGISTERED AG	ENT MUST S	IGN		Date		
this rein owed by	that I am an officer or director or the rece statement application, the reason for diss r the corporation have been paid and the application is true and accurate, and my s	olution has been names of individ	eliminated, th uals listed on	e corporate name satisfies t this form do not qualify for a	the requirements an exemption und	of section 607.0401 or 617.040	01, F.S., that all fees	
		// ,	,		_	,		
SIGNAT	TURE: OF THE	<u> </u>		CON MILLER	CFO	Per.3001 60	4-521-3369	

FLORIDA

CONSENT TO SERVE AS REGISTERED AGENT

C T CORPORATION SYSTEM having been designated to act as registered agent hereby agrees to act in this capacity for the following corporation:

Ableauctions.com, Inc.

C T CORPORATION SYSTEM

Date: October 29, 2001 Kathleen C. Gariepy C Assistant Secretary