



**CORPORATIONS INFORMATION ACT ANNUAL RETURN FOR FOREIGN BUSINESS CORPORATIONS
(2009 and later tax years)**

Corporation's name	Business Number	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center; font-size: small;">Tax year-end</td> <td style="text-align: center; font-size: small;">Month</td> <td style="text-align: center; font-size: small;">Day</td> </tr> <tr> <td style="text-align: center;">Year</td> <td style="text-align: center;">Month</td> <td style="text-align: center;">Day</td> </tr> </table>	Tax year-end	Month	Day	Year	Month	Day
Tax year-end	Month	Day						
Year	Month	Day						

- This schedule should be completed by a business corporation that is incorporated, continued, or amalgamated in a jurisdiction **outside Canada** with a licence under the Ontario *Extra-Provincial Corporations Act* to carry on business in Ontario. This completed schedule serves as a *Corporations Information Act* Annual Return under the Ontario *Corporations Information Act*.
- Complete parts 1 to 4. Complete parts 5 to 9 only to report change(s) in the information recorded on the Ontario Ministry of Government Services (MGS) public record.
- This schedule must set out the required information for the corporation as of the date of delivery of this schedule.
- A completed Ontario *Corporations Information Act* Annual Return must be delivered within six months after the end of the corporation's tax year-end. The MGS considers this return to be delivered on the date that it is filed with the Canada Revenue Agency together with the corporation's income tax return.
- It is the corporation's responsibility to ensure that the information shown on the MGS public record is accurate and up-to-date. To review the information shown for the corporation on the public record maintained by the MGS, obtain a Corporation Profile Report. Visit www.ServiceOntario.ca for more information.
- This schedule contains non-tax information collected under the authority of the Ontario *Corporations Information Act*. This information will be sent to the MGS for the purposes of recording the information on the public record maintained by the MGS.

Part 1 – Identification

100 Corporation's name (exactly as shown on the MGS public record)									
110 Jurisdiction incorporated, continued, or amalgamated, whichever is the most recent (see first bullet)	120 Date of incorporation or amalgamation, whichever is the most recent	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center; font-size: small;">Year</td> <td style="text-align: center; font-size: small;">Month</td> <td style="text-align: center; font-size: small;">Day</td> </tr> <tr> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> <td style="text-align: center;"> </td> </tr> </table>	Year	Month	Day				130 Ontario Corporation No.
Year	Month	Day							
			0 0						

Part 2 – Head or registered office address (P.O. box not acceptable as stand-alone address)

200 Care of (if applicable)			
210 Street number	220 Street name/Rural route/Lot and Concession number	230 Suite number	
240 Additional address information if applicable (line 220 must be completed first)			
250 Municipality (e.g., city, town)	260 Province/state	270 Country	280 Postal/zip code

Part 3 – Change identifier

Have there been any changes in any of the information most recently filed for the public record maintained by the MGS for the corporation with respect to the address of principal office in Ontario, if any, the language of preference, the date commenced in Ontario and, if applicable, the date ceased in Ontario, the chief officer or manager in Ontario, if any, or the agent for service in Ontario? To review the information shown for the corporation on the public record maintained by the MGS, obtain a Corporation Profile Report. For more information, visit www.ServiceOntario.ca.

300 If there have been no changes, enter **1** in this box and then go to "Part 4 – Certification."
 If there are changes, enter **2** in this box and complete the applicable parts on the next page, and then go to "Part 4 – Certification."

Part 4 – Certification

I certify that all information given in this *Corporations Information Act* Annual Return is true, correct, and complete.

450 _____ **451** _____ **454** _____
 Last name First name Middle name(s)

460 Please enter one of the following numbers in this box for the above-named person: **1** for director, **2** for officer, or **3** for other individual having knowledge of the affairs of the corporation. If you are a director and an officer, enter **1** or **2**.

Note: Sections 13 and 14 of the Ontario *Corporations Information Act* provide penalties for making false or misleading statements or omissions.

Complete the applicable parts to report changes in the information recorded on the MGS public record.

Part 5 – Address of principal office in Ontario, if any (P.O. box not acceptable as stand-alone address)

500	<input type="checkbox"/> Please enter one of the following two numbers in this box: 1 – Show no address of principal office in Ontario on the MGS public record. 2 – The corporation's complete address in Ontario of the principal office is as follows:				
510	Care of (if applicable)				
520	Street number	530	Street name/Rural route/Lot and Concession number	540	Suite number
550	Additional address information if applicable (line 530 must be completed first)				
560	Municipality (e.g., city, town)	Province	Country	570	Postal code
		Ontario	Canada		

Part 6 – Language of preference

600	<input type="checkbox"/> Indicate your language of preference by entering 1 for English or 2 for French. This is the language of preference recorded on the MGS public record for communications with the corporation. It may be different from line 990 on the T2 return.
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Part 7 – Date activity commenced or ceased, if applicable, in Ontario

Enter the date the corporation commenced activities in Ontario and, if applicable, the date activities ceased in Ontario	700	<table border="1" style="width:100%; text-align:center; font-size:small;"> <tr><th colspan="3">Commenced in Ontario</th></tr> <tr><td>Year</td><td>Month</td><td>Day</td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>	Commenced in Ontario			Year	Month	Day				710	<table border="1" style="width:100%; text-align:center; font-size:small;"> <tr><th colspan="3">Ceased in Ontario, if applicable</th></tr> <tr><td>Year</td><td>Month</td><td>Day</td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>	Ceased in Ontario, if applicable			Year	Month	Day			
Commenced in Ontario																						
Year	Month	Day																				
Ceased in Ontario, if applicable																						
Year	Month	Day																				

Part 8 – Chief officer or manager in Ontario, if any

Name and office address of the chief officer or manager in Ontario, if any																								
800	Last name	805	First name	810	Middle name(s)																			
820	Street number	825	Street name/Rural route/Lot and Concession number	830	Suite number																			
840	Additional address information if applicable (line 825 must be completed first)																							
850	Municipality (e.g., city, town)	Province	Country	860	Postal code																			
		Ontario	Canada																					
Enter the date the person assumed this position and, if applicable, the date the person ceased to hold this position																								
890	<table border="1" style="width:100%; text-align:center; font-size:small;"> <tr><th colspan="3">Date appointed</th></tr> <tr><td>Year</td><td>Month</td><td>Day</td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>			Date appointed			Year	Month	Day				895	<table border="1" style="width:100%; text-align:center; font-size:small;"> <tr><th colspan="3">Date ceased, if applicable</th></tr> <tr><td>Year</td><td>Month</td><td>Day</td></tr> <tr><td> </td><td> </td><td> </td></tr> </table>		Date ceased, if applicable			Year	Month	Day			
Date appointed																								
Year	Month	Day																						
Date ceased, if applicable																								
Year	Month	Day																						

Part 9 – Agent for service in Ontario

If the agent for service is an individual, complete Parts 9a and 9c. If the agent for service is a corporation, complete Parts 9b and 9c. The address entered must be the head or registered office address of the corporation.

Part 9a (individual)

900	Last name	905	First name	910	Middle name(s)
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Part 9b (corporation)

915	Corporation's name (exactly as shown on the MGS public record)					
916	Care of (if applicable)				917	Ontario Corporation No.
					0	0

Part 9c (individual or corporation – must be an Ontario address)

920	Street number	925	Street name/Rural route/Lot and Concession number	930	Suite number
940	Additional address information if applicable (line 925 must be completed first)				
950	Municipality (e.g., city, town)	960	Province	970	Country
				980	Postal code