INDIVIDUAL IDENTIFICATION INFORMATION RECORD

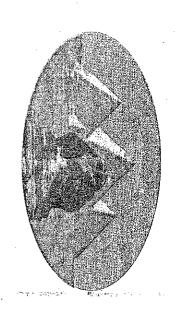
Information required by the Proceeds of Crime (Money Laundering) and Terrorist Financing Act.

Vendor: AMACON DEVELOPMENT (CITY CENTRE) CORP.	
Lot/Suite #: 1504 Phase/Tower: TWO Pla	an No.:
Street: in the of	
Date of Offer: June 09, 2012	
Sales Representative:	
Verification of Individual	
1. Full Legal Name of Individual:	MOHAMED MOHYELDINE MOHAMED ZAKI SABRY
2. Address:	976 SOUTHFORK DR, MISSISSAUGA, ONTARIO, L5V 2K6
3. Date of Birth:	December 14, 1929
4. Principal Business or Occupation:	Remero
5. Identification Document (must see original):	DRIVES LICOUSE
6. Document Identification Number:	<u>A00767917</u>
7. Issuing Jurisdiction:	27/05/2009
8. Document Expiry Date (must not be expired):	26/05/2016
NOTE: This section must be completed for each purchaser. If the individual refuses to provide information must make a record of same detailing what efforts were made to get such information.	
Acceptable Identification Documents: birth certificate, driver's licence, passport, record of landing, permanent resident card, old age security card, certificate of Indian Status or SIN card (although SIN numbers are NOT to be provided to FINTRAC). If the identification is from a foreign jurisdiction should be equivalent to one of the above noted documents. Provincial health card NOT an acceptable form of identification.	
Verification of Third Parties (if applicable)	
Note: Must be completed with a client or unrepresented individual if acting on behalf of a third party. If you suspect the client is acting on behalf of a third party but cannot verify same you must keep record of that fact.	
1. Name of third Party:	
2. Address:	
3. Date of Birth:	
4. Principal Business or Occupation:	
5. Incorporation number and place of issue (corporations/other entities only)	
6. Relationship between third party and client:	

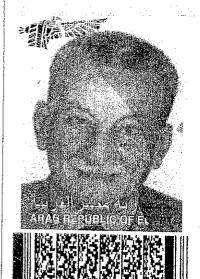
Lot No./Suite:1504 Plan No.: Site:THE RESIDENCES AT PARKSIDE VILLAGE

یشسمل هندا الجسواز ۵۲ صفحته This Passport contains 52 Pages

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Type / والبراز Country Code / برانبه A00767917 الدع A00767917 الربيد البراز Name MOHAMED MOHYELDINE MOHAMED ZAKI SABRY

Date Of Birth Place of Birth 14/12/1929 ALEXANDRIA المحمد المحرى والمحرى والمحرى

P<EGYSABRY<<MOHAMED<MOHYELDINE<MOHAMED<ZAKI