## CORPORATION OR OTHER ENTITY IDENTIFICATION INFORMATION RECORD

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

Ve	lor: AMACON DEVELOPMENT (CITY CENTRE) CORP.	
Lo	Suite #: 3206 Phase/Tower: Avia 2 Plan No.:	
Str	t: 4130 Parkside Village Drive in the City of Mississauga	
Da	of Offer: October 15, 2020	
Sal	Representative: In2ition Realty	
Ve	fication of Corporation	
1.	Name of Corporation: 2767314 Ontario Inc	
2.	Corporate Address: 4011 Brickstone Mews suite 2204 Mississauga ON L5B 0J7	
3.	Principal Business:	
4.	Name of Directors (as set out Form 1 or articles of incorporation) MUST KEEP COPY OF RECORD USED: SUKAINA CHANDOO	
5.	Verification of Existence of Corporation (certificate of corporate status, published annual report, government notice assessment) MUST KEEP COPY OF RECORD USED:	e of
6.	Registration number of Corporation: <u>002767314</u>	
7.	Copy of corporate record showing authority to bind the corporation (e.g. certificate of incumbency, articles of ncorporation, by-laws):	
Ve	fication of Partnerships, Trusts or Other Entity	
	Fication of Partnerships, Trusts or Other Entity  Name of other Entity:	
1.	Name of other Entity:	
<ol> <li>2.</li> </ol>	Name of other Entity:  Address:	
<ol> <li>2.</li> <li>3.</li> <li>4.</li> </ol>	Name of other Entity:  Address:  Principal Business:  Verification of existence of Entity (i.e. partnership agreement, articles of association) MUST KEEP COPY OF RECORD:	
<ol> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> </ol>	Name of other Entity:  Address:  Principal Business:  Verification of existence of Entity (i.e. partnership agreement, articles of association) MUST KEEP COPY OF RECORD:	
<ol> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>Ve</li> <li>No</li> </ol>	Name of other Entity:  Address:  Principal Business:  Verification of existence of Entity (i.e. partnership agreement, articles of association) MUST KEEP COPY OF RECORD:  Registration Number (if applicable):	of
<ol> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>Ve</li> <li>No</li> </ol>	Name of other Entity:  Address:  Principal Business:  Verification of existence of Entity (i.e. partnership agreement, articles of association) MUST KEEP COPY OF RECORD:  Registration Number (if applicable):  fication of Third Parties (if applicable)  : Must be completed when a client is acting on behalf of a third party. If you suspect the client is acting on behalf	· of
<ol> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>Ve</li> <li>No a th</li> </ol>	Name of other Entity:  Address:  Principal Business:  Verification of existence of Entity (i.e. partnership agreement, articles of association) MUST KEEP COPY OF RECORD:  Registration Number (if applicable):  fication of Third Parties (if applicable)  Must be completed when a client is acting on behalf of a third party. If you suspect the client is acting on behalf d party but cannot verify same you must keep record of that fact.	of
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<ol> <li>1.</li> <li>2.</li> <li>3.</li> <li>4.</li> <li>Ve</li> <li>No a th</li> <li>1.</li> <li>2.</li> </ol>	Name of other Entity:  Address:  Principal Business:  Verification of existence of Entity (i.e. partnership agreement, articles of association) MUST KEEP COPY OF RECORD:  Registration Number (if applicable):  State of Third Parties (if applicable)  Must be completed when a client is acting on behalf of a third party. If you suspect the client is acting on behalf d party but cannot verify same you must keep record of that fact.  Name of third Party:  Address:	of

6. Relationship between third party and client: \_\_\_\_\_