

**INDIVIDUAL IDENTIFICATION INFORMATION RECORD**  
Information required by the *Proceeds of Crime (Money Laundering) and Terrorist Financing Act*.

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Vendor: **AMACON DEVELOPMENT (CITY CENTRE) CORP.**

Lot/Suite #: **1219**    Phase/Tower: **9 South**    Plan No.:

Street: **4055-4085 Parkside Village Drive** in the City of **Mississauga**

Date of Offer: **April 20, 2015**

Sales Representative: **In2ition Realty**

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**Verification of Individual**

- |   |  |
|---|--|
| 1. Full Legal Name of Individual:               | <b>MING LIANG</b>  |
| 2. Address:                                     | <b>2101 BARSUDA DRIVE,<br/>MISSISSAUGA, ONTARIO, L5J 1V6</b> |
| 3. Date of Birth:                               | <b>April 04, 1961</b>  |
| 4. Principal Business or Occupation:            | <u>SMALL BUSINESS OWNER</u>                                  |
| 5. Identification Document (must see original): | <u>Driver's Licence</u>                                      |
| 6. Document Identification Number:              | <b><u>L4016-55606-10404</u></b>                              |
| 7. Issuing Jurisdiction:                        | <u>Ontario</u>   |
| 8. Document Expiry Date (must not be expired):  | <u>2020/4/4</u>  |

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.

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**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.

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|---|-------|
| 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:                               | _____ |

Black Swan Seven

1219-8273900

Agent - Liang - Hongyan

RW & 20 Atois

Ontario Driver's Licence  
Permis de conduire ON CANADA

1,2 NAME/NOM  
LIANG, MING

5 2101 BARSUDA DR  
MISSISSAUGA, ON, L5J 1V6

4d NUMBER/  
NUMERO L4016 - 55606 - 10404

4a ISS/DEL 2015/03/10

4b EXP/EXP. 2020/04/04

5 DO/REF DC7690278

15 SEX/SEXE M

9 CLASS/ CATEG G

12 REST/ COND

3 DOB/DOIN 1961/04/04

16 HGT/HAUT. 175 cm

L4016-55606-10404  
1961/04/04

Verified I.D. by Doc-Legal. Apr 10/2015

*[Signature]*