

PSV - Block 7 - PSV
AMENDMENT TO AGREEMENT OF PURCHASE AND SALE

Between: **AMACON DEVELOPMENT (CITY CENTRE) CORP.** (the "Vendor") and

MOUNA BARGHOUTH (the "Purchaser")

Suite **1605** Tower **ONE** Unit **5** Level **15** (the "Unit")

It is hereby understood and agreed between the Vendor and the Purchaser that the following change(s) shall be made to the above-mentioned Agreement of Purchase and Sale, and except for such change(s) noted below, all other terms and conditions of the Agreement shall remain as stated therein, and time shall continue to be of the essence.

DELETE: FROM THE AGREEMENT OF PURCHASE AND SALE

N/A

INSERT: TO THE AGREEMENT OF PURCHASE AND SALE

The undersigned, MAIS, HANI, YOUSE AKKAWI (collectively, the "Purchaser")

DATE OF BIRTH: 08/11/1987

DRIVER'S LICENCE: A4892-51048-75811

SIN No:

CURRENT ADDRESS: 2109-4450 TUCANA CRT. MISSISSAUGA, ONTARIO, L5R 3R4

TELEPHONE: 647-938-9590

EMAIL: MAIS.AKKAWI@GMAIL.COM

OCCUPATION: OFFICE MANAGER

EMPLOYER: CDC RAINBOW

(Relationship to original purchaser: DAUGHTER_)

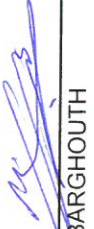
Signature: 

Dated at **Mississauga, Ontario** this 12 day of November, 2016.

SIGNED, SEALED AND DELIVERED

In the Presence of:

Witness


Purchaser - **MOUNA BARGHOUTH**

Accepted at _____ this _____ day of _____, 2016.

AMACON DEVELOPMENT (CITY CENTRE) CORP.

Per: _____ c/s

Authorized Signing Officer
I have the authority to bind the Corporation.

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 #: **1605** Phase/Tower: **ONE** Plan No.:

Street: **4011 Brickstone Mews** in the City of **Mississauga**

Date of Offer: **February 26, 2012**

Sales Representative: **In2ition Realty**

Verification of Individual

1. Full Legal Name of Individual: **MAIS, HANI, YOUSE AKKAWI**
2. Address: **2109-4450 TUCANA CRT
MISSISSAUGA, ONTARIO, L5R 3R4**
3. Date of Birth: **AUGUST 11, 1987**
4. Principal Business or Occupation: *Cdc Rainbow - Office Manager.*
5. Identification Document (must see original): *Driver's License.*
6. Document Identification Number: **A4892-51048-75811**
7. Issuing Jurisdiction: *Ontario*
8. Document Expiry Date (must not be expired): *2021/08/11*

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: _____

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