PSV1 #4110

Passport No.
Passeport N°
N 005884413

وزارة الداخلية – إدارة الهجرة والجوازات

MINISTRY OF INTERIOR - DEPARTMENT OF IMMIGRATION AND PASSPORTS

MINISTÈRE DE L'INTÉRIEUR - DÉPARTEMENT DE L'IMMIGRATION ET DES PASSEPORTS

1001191023

Director of Department of Immigration and Passports or the General Consul

Directeur du Département de l'Immigration et des Passeports ou le Consul Général

SYRIAN ARAB REPUBLIC
RÉPUBLIQUE ARABE SYRIENNE
الجمهورية العربية السورية

PASSPORT
PASSEPORT
جواز سفر

Type/Type/الرمز: P
Country code/Code du pays/رمز البلد: SYR

Issue no./N délivrance: 007-11-L005130 :رقم الإصدار

Given Name/Prénom:	ISMAIL	اسماعيل	:الاسم
Surname/Nom:	RASTANAWI	الرستناوي	:النسبة
Father Name/Nom du père:	MUSTAFA	مصطفى	:اسم الأب
Mother Name/Nom de la mère:	IFTEKAR	افتخار	:اسم الأم
Birth Date/Date de naissance:	01/01/1964		:تاريخ الولادة
Birth Place/Lieu de naissance:	HOMS	حمص	:مكان الولادة
Sex/Sexe:	M		:الجنس

PNSYRRASTANAWI<<ISMAIL<<<<<<<<<<<<<<<<<<<<<<
0058844133SYR6401012M1702068040<10602884<<36

Date of issue/Date de délivrance: 07/02/2011 تاريخ الاصدار:

Place of issue/Lieu de délivrance: Homs-Center مكان الاصدار: فرع هجرة حمص

Expiry date/Date d'expiration: 06/02/2017 تاريخ انتهاء الصلاحية:

National number/Numéro national: 040-10602884 الرقم الوطني:

Occupation/Profession: MECH .ENG . المهنة: مهندس ميكانيك

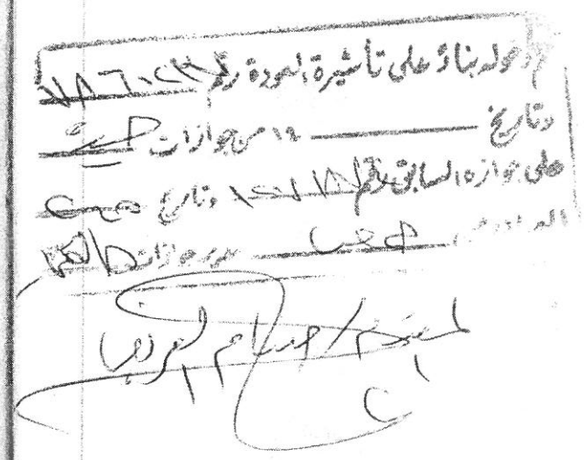
Signature/Signature: التوقيع:

التجديد

03 Renewal
Renouvellement

هذه الهوية غير صالحة للاستعمال

٢١٧٢٠٥٧٦٥٥



تعليمات بشأن جوازات السفر

١. تصدر جوازات السفر في الجمهورية العربية السورية من إدارة الهجرة والجوازات وفروعها في المحافظات والقنصليات العربية السورية والسلطات التي تعهد إليها حكومة الجمهورية العربية السورية بذلك.

٢. على السوريين المقيمين في الخارج وليست لديهم جوازات سفر أن يقدموا طلباتهم إلى أقرب قنصلية أو بعثة دبلوماسية أخرى ترعى مصالح العرب السوريين.

٣. لا يجوز إضافة صحائف جديدة على هذا الجواز

ملاحظة هامة

يُعد هذا الجواز وثيقة ذات أهمية خاصة ويجب اتخاذ الحيطة للحيلولة دون وقوعه في حيازة أي شخص ليس له حق في حمله، وإذا فقد أو تلف يجب المبادرة فوراً إلى إبلاغ الجهة التي أصدرته أو أقرب سلطة قنصلية أو أي بعثة أخرى ترعى مصالح الرعايا العرب السوريين في الخارج ولا تصدر جوازات سفر جديدة في مثل هذه الأحوال إلاّ بعد بحث وتمحيص تامين.

— SYRIAN PRODUCT —

CONTINUING POWER OF ATTORNEY FOR PROPERTY (SHORT FORM)

THIS CONTINUING POWER OF ATTORNEY FOR PROPERTY is given

by Mr. ISMAIL RASTANAWI
[Grantor]

of the City of MISSISSAUGA in the Province of Ontario

APPOINTMENT

I APPOINT my Mr. KHALID ABDULAHAD

to be my attorney(s) for property, and I authorize my attorney(s) to do, on my behalf, any and all acts, which I could do if capable, except make a will, subject to any conditions and restrictions contained herein. My attorney(s) shall have the authority to act as my litigation guardian, if one is required to commence, continue, defend or represent me in any court proceeding. All decisions to be made by my attorneys pursuant to this Power of Attorney shall be made by majority vote as between them.

SUBSTITUTION

1. If the above appointed attorney(s) refuse(s) to act, or is or are unable to act by reason of death, court removal, becoming incapable of managing property or resignation,

I SUBSTITUTE AND APPOINT my Mr. DIYA ATASSI

to act as my attorney(s) for my property, in the place of any attorney(s) appointed in paragraph 1 hereof who refuse(s) or is or are unable to act. The substituted attorney(s) shall, if able and willing to act, thereafter be my attorney(s) for property, together with any attorney appointed in paragraph 1 hereof who is able and willing to act and I authorize him, her or them thereafter to do, on my behalf, any and all acts which I could do, if capable, except make a will, subject to any conditions and restrictions contained herein. All decisions to be made by my substitute attorneys pursuant to this Power of Attorney shall be made by majority vote as between them.

CONTINUING POWER

2. This is a continuing power of attorney. It is my intention and I so authorize my attorney(s) that the authority given in this continuing power of attorney may be exercised during any incapacity on my part to manage my property, pursuant to section 7 of the *Substitute Decisions Act*.

FAMILY LAW ACT CONSENT

3. If my spouse disposes of or encumbers any interest in a matrimonial home in which I have a right to possession under Part II of the *Family Law Act*, I authorize the attorney(s) named in this power of attorney for me and in my name to consent to the transaction as provided for in clause 21(1)(a) of the said Act.

CONDITIONS AND RESTRICTIONS

4. None.

-or-

5. This power of attorney is limited to making decisions, taking actions and executing any documents as may be necessary with respect to the property located at Parkside Village at Burnhamthorp Rood West, Mississauga, Ontario, CANADA.

EFFECTIVE DATE

6. This continuing power of attorney for property comes into effect upon the date hereof.

REVOCATION

7. Any prior power of attorney for property or any power of attorney which affects my property given by me, except a power of attorney given to a bank or financial institution for the purpose of transacting my business with that bank or financial institution, is hereby revoked.

COMPENSATION

8. I authorize my attorney(s) and my attorney(s) has or have agreed to accept no compensation for any work done by him, her or them pursuant to this power of attorney for property.

Executed at Jeddah this 18 day of March, 2012 in the presence of both witnesses, each present at the same time.

Witness #1

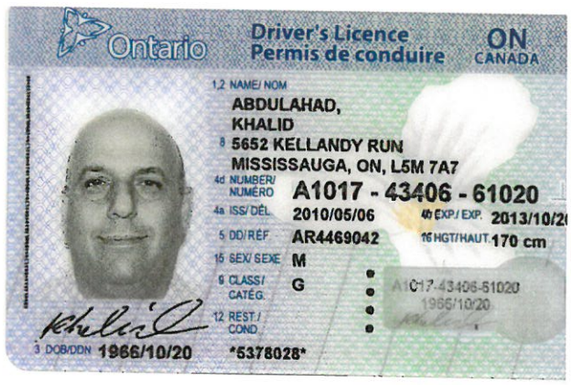
Address:

Witness #2

Address: Nafie Nazmani

ISMAIL RASTANAWI
Grantor

POA.


Ontario
Driver's Licence
Permis de conduire
ON
CANADA
1,2 NAME/ NOM
ABDULAHAD,
KHALID
8 5652 KELLANDY RUN
MISSISSAUGA, ON, L5M 7A7
4d NUMBER/ NUMÉRO A1017 - 43406 - 61020
4a ISS/ DÉL. 2010/05/06
4b EXP./ EXP. 2013/10/2
5 DD/ RÉF. AR4469042
16 HGT/ HAUT. 170 cm
15 SEX/ SEXE M
9 CLASS/ CATÉG. G
12 REST./ COND.
3 DOB/DDN 1966/10/20
5378028
A1017-43406-61020
1966/10/20

03/24/2022

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 #: **4110** Phase/Tower: **ONE** Plan No.:

Street: in the **City** of **Mississauga**

Date of Offer: **March 24, 2012**

Sales Representative: **ALEN**

Verification of Individual

1. Full Legal Name of Individual: **ISMAIL RASTANAWI**
2. Address: **ALAZIZYA, TAHLIA ST., B#15 F#17**
   KSA, , ~~L5M 7A7~~ JEDDAH
3. Date of Birth: **January 01, 1964**
4. Principal Business or Occupation: Engineer
5. Identification Document (must see original): _____
6. Document Identification Number: **PASSPORT 007-11-L005130**
7. Issuing Jurisdiction: _____
8. Document Expiry Date (must not be expired): _____

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: _____