

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005159

FILED  
Apr 11, 2011  
Secretary of State

**Entity Name:** MCM MANAGEMENT CORP. SOUTH

**Current Principal Place of Business:**

35980 WOODWARD AVE.  
SUITE 210  
BLOOMFIELD HILLS, MI 48304

**New Principal Place of Business:**

**Current Mailing Address:**

35980 WOODWARD AVE.  
SUITE 210  
BLOOMFIELD HILLS, MI 48304

**New Mailing Address:**

**FEI Number:** 38-3126593      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: MARDIGIAN, DAVID H  
Address: 35980 WOODWARD AVE., #210  
City-St-Zip: BLOOMFIELD HILLS, MI 48304 US

Title: PS  
Name: MARDIGIAN, ROBERT G  
Address: 35980 WOODWARD AVE. #210  
City-St-Zip: BLOOMFIELD HILLS, MI 48304 US

Title: S  
Name: YAROCH, ROBERT L  
Address: 35980 WOODWARD AVE., #210  
City-St-Zip: BLOOMFIELD HILLS, MI 48304 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT L. YAROCH

AS

04/11/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date