

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000074205

Entity Name: GPRA COMMERCIAL ENTERPRISES, INC.**Current Principal Place of Business:**901 SOUTH FEDERAL HIGHWAY
HALLANDALE BEACH, FL 33009**Current Mailing Address:**455 MAGNA DRIVE
SECOND FLOOR
AURORA, ON L4G 7-A9 CA**FEI Number:** 47-0956156**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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

Officer/Director Detail :

Title	V
Name	STRACHAN, LYLE
Address	455 MAGNA DRIVE
City-State-Zip:	AURORA ON L4G 7-A9
Title	T
Name	COLEMAN, ANGIE
Address	901 S. FEDERAL HIGHWAY
City-State-Zip:	HALLANDALE FL 33009
Title	PRESIDENT AND GENERAL MANAGER
Name	RITVO, TIM
Address	901 S. FEDERAL HIGHWAY
City-State-Zip:	HALLANDALE FL 33009
Title	CFO, DIRECTOR
Name	SIMONETTI, JOHN
Address	455 MAGNA DRIVE
City-State-Zip:	AURORA ON L4G 7A9

Title	VP, OPERATIONS
Name	ROGERS, MIKE
Address	455 MAGNA DRIVE
City-State-Zip:	AURORA ON L4G 7A9
Title	D
Name	STRONACH, BELINDA
Address	455 MAGNA DRIVE
City-State-Zip:	AURORA ON L4G 7-A9
Title	DCEO
Name	OSSIP, ALON
Address	455 MAGNA DRIVE
City-State-Zip:	AURORA ON L4G 7-A9
Title	SECRETARY
Name	LYNN, JANE
Address	455 MAGNA DRIVE
City-State-Zip:	AURORA ONTARIO L4G 7A9

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: JOHN SIMONETTI**CFO****01/28/2014**

Electronic Signature of Signing Officer/Director Detail

Date