

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000022741

**Entity Name:** ASSIST-CARD MARKETING (USA), INC.**Current Principal Place of Business:**175 SW 7TH STREET  
SUITE 2407  
MIAMI, FL 33130**Current Mailing Address:**175 SW 7TH STREET  
SUITE 2407  
MIAMI, FL 33130 US**FEI Number:** 65-0402292**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 DIRECTOR  
Name KEGLEVICH, ALEXIA DIANA  
Address ASSIST-CARD BUILDING  
ARIAS 3751 - C1430CRC  
City-State-Zip: BUENOS AIRES BUENOS AIRES

Title PRESIDENT, DIRECTOR  
Name KITZMAN, ELEANOR  
Address 399 PARK AVENUE  
8TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title TREASURER  
Name CHILDS, NIGEL FITZMAURICE  
Address 399 PARK AVENUE  
8TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title SECRETARY  
Name BRYAN, THOMAS A  
Address 399 PARK AVENUE  
8TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title VP  
Name LUIKERT, JOHN A.  
Address 3353 PEACHTREE ROAD N.E.  
SUITE 1000  
City-State-Zip: ATLANTA GA 30326

Title ASSISTANT VICE PRESIDENT  
Name DEGALA, DAVID  
Address 1000 WILSHIRE BLVD  
SUITE 2200  
City-State-Zip: LOS ANGELES CA 90017

Title ASSISTANT SECRETARY  
Name MURRAY, JULIE  
Address 399 PARK AVENUE  
8TH FLOOR  
City-State-Zip: NEW YORK NY 10022

*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:** JULIE MURRAY

ASSISTANT SECRETARY 04/15/2014

Electronic Signature of Signing Officer/Director Detail

Date