

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000000006

**Entity Name:** AXA DISTRIBUTION HOLDING CORPORATION**Current Principal Place of Business:**1290 AVENUE OF THE AMERICAS  
NEW YORK, NY 10104**Current Mailing Address:**1290 AVENUE OF THE AMERICAS  
NEW YORK, NY 10104 US**FEI Number: 13-4078005****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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	CEO, CHAIRMAN
Name	MALMSTROM, ANDERS
Address	1290 AVENUE OF THE AMERICAS
City-State-Zip:	NEW YORK NY 10104

Title	PRESIDENT, CFO, DIRECTOR
Name	BRAVERMAN, JOSHUA E
Address	1290 AVENUE OF THE AMERICAS
City-State-Zip:	NEW YORK NY 10104

Title	SEC, VP
Name	HAZIN, KAREN F
Address	1290 AVENUE OF THE AMERICAS
City-State-Zip:	NEW YORK NY 10104

Title	TREASURER, VP
Name	TARONI, JOHN C
Address	1290 AVENUE OF THE AMERICAS
City-State-Zip:	NEW YORK NY 10104

*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: KAREN FIELD HAZIN****SECRETARY****04/23/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date