

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000000757

Entity Name: PEERFORM, INC.

**Current Principal Place of Business:**

369 LEXINGTON AVENUE  
28TH FLOOR  
NEW YORK, NY 10017

**Current Mailing Address:**

369 LEXINGTON AVENUE  
28TH FLOOR  
NEW YORK, NY 10017

FEI Number: 27-2492508

Certificate of Status Desired: No

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

UNITED CORPORATE SERVICES, INC.  
9200 SOUTH DADELAND BOULEVARD  
SUITE 508  
MIAMI, FL 33156 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 D  
Name GALAM, ELIE  
Address C/O PEERFORM 369 LEXINGTON AVENUE, 28TH FL  
City-State-Zip: NEW YORK NY 10017

Title D  
Name BENICHO, MEY TAL  
Address C/O PEERFORM 369 LEXINGTON AVENUE, 28TH FL  
City-State-Zip: NEW YORK NY 10017

Title P  
Name RAPAPORT, MIKAEL  
Address C/O PEERFORM 369 LEXINGTON AVENUE, 28TH FL  
City-State-Zip: NEW YORK NY 10017

Title S  
Name LEMMEL, OURIEL  
Address C/O PEERFORM 369 LEXINGTON AVENUE, 28TH FL  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name JOACHIM, AZRIA  
Address 369 LEXINGTON AVENUE 28TH FLOOR  
City-State-Zip: NEW YORK NY 10017

Title DIRECTOR  
Name GREGG, SCHOENBERG  
Address 369 LEXINGTON AVENUE 28TH FLOOR  
City-State-Zip: NEW YORK NY 10017

*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: MIKAEL RAPAPORT

CEO

03/20/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date