

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F97000000713

**Entity Name:** AIR TRANSAT A.T. INC.

**Current Principal Place of Business:**

5959 COTE-VERTU BLVD  
MONTREAL, QC H4S-2E6

**Current Mailing Address:**

5959 COTE-VERTU BLVD  
MONTREAL, QC H4S-2E6 CA

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ROY, CELINE  
300 TERMINAL DRIVE  
TERMINAL 4  
FORT LAUDERDALE, FL 33315 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 OS  
Name CHARYSZ, AGNIESZKA  
Address 2700 RUFUS-ROCKHEAD, APT. 410  
City-State-Zip: MONTREAL QC H3J 2Z7

Title D  
Name DE MONTIGNY, ANDRÉ  
Address 4799 GROSVENOR STREET  
City-State-Zip: MONTREAL QC H3W 2K9

Title VD  
Name PETRIN, DENIS  
Address 7352, CANORA ROAD  
City-State-Zip: MONTREAL QC H3P 2J6

Title PD  
Name EUSTACHE, JEAN-MARC  
Address 18 HAZELWOOD  
City-State-Zip: OUTREMONT QC H3T 1R3

Title V  
Name COTE, JEAN  
Address 3741 JOHN LYMAN  
City-State-Zip: ST-LAURENT QC H4R 0C4

Title V  
Name TURNER, JON  
Address 59 DE CALAIS STREET  
City-State-Zip: MONTREAL QC H9H 3R7

Title GMGRD  
Name LEMAY, JEAN-FRANÇOIS  
Address 4460 PIE-IX BLVD.  
City-State-Zip: MONTREAL QC H1X 2B3

Title AS  
Name BUSSIÈRES, BERNARD  
Address 1619 DUCHARME STREET  
City-State-Zip: MONTREAL QC H2V 1G6

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*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:** AGNIESZKA CHARYSZ

OS

01/21/2014

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title V  
Name CHARENTE, MICHEL  
Address 39 DE LA MARQUISE STREET  
City-State-Zip: SAINT-SAUVEUR QC J0R 1R4

Title V  
Name DACOULIS, JOHN  
Address 28 DUBOIS STREET  
City-State-Zip: MONTREAL QC H9B 1L1

Title V  
Name RYAN, DES  
Address 1816 PADDOCK CRESCENT  
City-State-Zip: MISSISSAUGA ON L5L 3E4