

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000006000

Entity Name: MCH MESSE BASEL AG

FILED  
Jan 21, 2009  
Secretary of State

## Current Principal Place of Business:

MESSEPLATZ  
P.O. BOX CH- 4005  
BASEL, SZ CH4005 SZ

## New Principal Place of Business:

MESSEPLATZ  
POSTFACH  
BASEL, SZ CH4005 SZ

## Current Mailing Address:

MALLAH FURMAN AND COMPANY, P.A.  
1001 BRICKELL BAY DRIVE, SUITE 1400  
MIAMI, FL 331314938

## New Mailing Address:

FEI Number: 98-0350486      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MALLAH FURMAN AND COMPANY P.A.  
1001 BRICKELL BAY DRIVE, SUITE 1400  
MIAMI, FL 331314938 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: KAMM, RENE'  
Address: UNTERER RHEINWEG 46, CH-4057 BASEL  
City-St-Zip: BASEL, SZ CH4005 SZ

Title: V ( ) Delete  
Name: SCHOENHOLZER, ANNETTE  
Address: NADELBERG 17  
City-St-Zip: BASEL, 8Z, CH-401 SZ

Title: D ( ) Delete  
Name: HAERING, MARKUS  
Address: CHILMETWEG 8, 4464 MAISPRACH  
City-St-Zip: BASEL, SZ CH4005 SZ

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BENJAMIN D. BOHLMANN

CPA

01/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date