

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003744

Entity Name: THE PEAK GROUP, INC.

FILED  
Mar 02, 2009  
Secretary of State

## Current Principal Place of Business:

10300 OLD COLUMBIA RD  
COLUMBIA, MD 21046

## New Principal Place of Business:

## Current Mailing Address:

360 N CRESCENT DR SOUTH BLDG  
BEVERLY HILLS, CA 90210

## New Mailing Address:

FEI Number: 36-3149386

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: YOUNG, ROSS  
Address: 10330 OLD COLUMBIA RD  
City-St-Zip: COLUMBIA, MD 21046

Title: DVPS ( ) Delete  
Name: KALAWSKI, EVA M  
Address: 360 N CRESCENT DR SOUTH BLDG  
City-St-Zip: BEVERLY HILLS, CA 90210

Title: VPT ( ) Delete  
Name: JOUBRAN, ROBERT J  
Address: 360 N CRESCENT DR SOUTH BLDG  
City-St-Zip: BEVERLY HILLS, CA 90210

Title: VP ( ) Delete  
Name: SIGLER, MARY ANN  
Address: 360 N CRESCENT DR SOUTH BLDG  
City-St-Zip: BEVERLY HILLS, CA 90210

Title: AS ( ) Delete  
Name: WARD, SALLY A  
Address: 360 N CRESCENT DR SOUTH BLDG  
City-St-Zip: BEVERLY HILLS, CA 90210

Title: AT ( ) Delete  
Name: WALLOCH, DAWN  
Address: 360 N CRESCENT DR SOUTH BLDG  
City-St-Zip: BEVERLY HILLS, CA 90210

## 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:

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: SALLY A. WARD

AS

03/02/2009

Electronic Signature of Signing Officer or Director

Date