

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000004855

FILED
Apr 29, 2009
Secretary of State

Entity Name: MDA FEDERAL INC.

Current Principal Place of Business:

6011 EXECUTIVE BLVD.
SUITE 400
ROCKVILLE, MD 208523837 US

New Principal Place of Business:

Current Mailing Address:

13800 COMMERCE PKWY
RICHMOND, BC V6V 2J3 CA

New Mailing Address:

FEI Number: 52-0894197 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD.
STE. 101
TALLAHASSEE, FL 32301 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: PRES () Delete
Name: KOELN, GREGORY T DR.
Address: 20825 CLEAR MORNING COURT
City-St-Zip: GERMANTOWN, MD 20874 US

Title: SEC () Delete
Name: LORUSSO, PATRICIA L
Address: 12414 SADLER LANE
City-St-Zip: BOWIE, MD 20715 US

Title: DIR () Delete
Name: MARINO, PETER A
Address: 3040 O STREET NW
City-St-Zip: WASHINGTON, DC 20007 US

Title: DIR () Delete
Name: KRYGIEL, ANNETTE J
Address: 757 KENTLAND DRIVE
City-St-Zip: GREAT FALLS, VA 22066 US

Title: DIR () Delete
Name: ISKANDER, MAGUED
Address: 2172 PARKMOUNT BLVD.
City-St-Zip: OAKVILLE, ON L6H 6T4 CA

Title: DIR () Delete
Name: CADDEY, DAVID
Address: #49 - 15715 34TH AVENUE
City-St-Zip: SURREY, BC V3S 0J6 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Address:
City-St-Zip:

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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: MAGUED ISKANDER

DIR

04/29/2009

Electronic Signature of Signing Officer or Director

_____ Date