

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000034208

**FILED**  
**Feb 22, 2012**  
**Secretary of State**

**Entity Name:** MMA PUBLICATIONS CORPORATION

**Current Principal Place of Business:**

1400 POMBA STREET  
MONTREAL, QC H4R 2A1 CA

**New Principal Place of Business:**

2000 MCGILL COLLEGE AVENUE  
SUITE 2010  
MONTREAL, QC H3A 3H3 CA

**Current Mailing Address:**

1400 POMBA STREET  
MONTREAL, QC H4R 2A1 CA

**New Mailing Address:**

2000 MCGILL COLLEGE AVENUE  
SUITE 2010  
MONTREAL, QC H3A 3H3 CA

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

USECHE, AURELIO  
5396 GULF BOULEVARD, SUITE 308  
ST. PETE BEACH, FL 33706 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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: USECHE, AURELIO  
Address: 5396 GULF BOULEVARD, SUITE 308  
City-St-Zip: ST. PETE BEACH, FL 33706

Title: VPD  
Name: LAKDAWALA, LEENA  
Address: 5396 GULF BOULEVARD, SUITE 308  
City-St-Zip: ST. PETE BEACH, FL 33706

Title: STD  
Name: JOHNSON, DAVID A  
Address: 2956 KIRKFIELD AVE  
City-St-Zip: MONTREAL, QUEBEC CANADA, HR3 2E6

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: DAVID A. JOHNSON

STD

02/22/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date