

2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000245

Entity Name: MISSION NETWORK ACTIVITIES USA, INC.**Current Principal Place of Business:**590 COLUMBUS AVENUE
THORNWOOD, NY 10594**Current Mailing Address:**590 COLUMBUS AVENUE
THORNWOOD, NY 10594**FEI Number:** 06-1500537**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPDIRECT AGENTS
515 E. PARK AVE.
TALLAHASSEE, FL 32301 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 VP, D
Name BRANDENBURG, DANIEL
Address 7196 WILLOWOD DRIVE
City-State-Zip: CINCINNATI OH 45241

Title VP, D
Name LASANA, ANDRE
Address 2 HICKORY RUN
City-State-Zip: NEWTON SQUARE PA 19073

Title STD
Name ORTEGA, JOSE F
Address 582 COLUMBUS AVENUE
City-State-Zip: THORNWOOD NY 10594

Title D
Name KNUTH, MARIA
Address 60 AUSTIN AVENUE
City-State-Zip: GREENVILLE RI 02828

Title AS S
Name LEMOS, ANTONIO
Address 582 COLUMBUS AVENUE
City-State-Zip: THORNWOOD NY 10594

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSE F. ORTEGA**SECRETARY****01/23/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date