

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000006654

Entity Name: EXTRAPRISE GROUP, INC.**Current Principal Place of Business:**33 ARCH STREET
9TH FLOOR
BOSTON, MA 02110**Current Mailing Address:**33 ARCH STREET
9TH FLOOR
BOSTON, MA 02110 US**FEI Number:** 04-3354224**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	D
Name	MARSHALL, KENNETH
Address	33 ARCH STREET 9TH FLOOR
City-State-Zip:	BOSTON MA 02110

Title	CEO
Name	SHANKER, MICHAEL
Address	33 ARCH STREET 9TH FLOOR
City-State-Zip:	BOSTON MA 02110

Title	D
Name	MAHONEY, DAVID
Address	33 ARCH STREET 9TH FLOOR
City-State-Zip:	BOSTON MA 02110

Title	T
Name	DOSTAL, CHRISTINE C
Address	33 ARCH STREET 9TH FLOOR
City-State-Zip:	BOSTON MA 02110

Title	D
Name	MCCULLEN, JOSEPH
Address	33 ARCH STREET 9TH FLOOR
City-State-Zip:	BOSTON MA 02110

Title	D
Name	KOULOGEORGE, MARK
Address	33 ARCH STREET 9TH FLOOR
City-State-Zip:	BOSTON MA 02110

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: CHRISTINE C DOSTAL**TREASURER****04/19/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date