

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L63740

Entity Name: ON-BOARD MEDIA, INC.**Current Principal Place of Business:**8400 NW 36 STREET STE 520
DORAL, FL 33166**Current Mailing Address:**8400 NW 36 STREET STE 520
DORAL, FL 33166 US**FEI Number:** 65-0197349**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
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 SECRETARY
Name FIRESTONE, LOUISE
Address 19 EAST 57TH STREET
FIFTH FLOOR
City-State-Zip: NEW YORK NY 10022

Title CFO
Name DARRICAU, FRANCOIS
Address 8400 NW 36 STREET
SUITE 600
City-State-Zip: DORAL FL 33166

Title VICE PRESIDENT
Name JOHNSON, MAUREEN
Address 19 EAST 57TH STREET
FIFTH FLOOR
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name BRENNAN, EDWARD J
Address 8400 NW 36 STREET
SUITE 600
City-State-Zip: DORAL FL 33166

Title VICE PRESIDENT
Name JULIER, CAROLYN
Address 8400 NW 36 STREET
SUITE 520
City-State-Zip: DORAL FL 33166

Title DIRECTOR
Name MELWANI, ANISH
Address 8400 NW 36 STREET
SUITE 600
City-State-Zip: DORAL FL 33166

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: CAROLYN JULIER

VICE PRESIDENT

02/04/2019

Electronic Signature of Signing Officer/Director Detail_____
Date