

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000055423

Entity Name: VSN MOBIL, INC.

**Current Principal Place of Business:**

1975 EAST SUNRISE BOULEVARD  
SUITE 400  
FORT LAUDERDALE, FL 33304

**Current Mailing Address:**

1975 EAST SUNRISE BOULEVARD  
SUITE 400  
FORT LAUDERDALE, FL 33304 US

FEI Number: 42-1775976

Certificate of Status Desired: No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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            PRESIDENT, CEO  
Name            TOBIN, FRANK T.  
Address        1975 EAST SUNRISE BOULEVARD  
                 SUITE 400  
City-State-Zip: FORT LAUDERDALE FL 33304

Title            SECRETARY, TREASURER,  
                 DIRECTOR  
Name            FUENTES, JOSEPH A.  
Address        1975 EAST SUNRISE BOULEVARD  
                 SUITE 400  
City-State-Zip: FORT LAUDERDALE FL 33304

Title            DIRECTOR  
Name            HOYOS, HECTOR T.  
Address        1975 EAST SUNRISE BOULEVARD  
                 SUITE 400  
City-State-Zip: FT LAUDERDALE FL 33304

Title            DIRECTOR  
Name            MANAFORT, PAUL  
Address        1975 EAST SUNRISE BOULEVARD  
                 SUITE 400  
City-State-Zip: FORT LAUDERDALE FL 33304

Title            SENIOR VICE PRESIDENT  
Name            GARCIA, ENRIQUE  
Address        1975 EAST SUNRISE BOULEVARD  
                 SUITE 400  
City-State-Zip: FORT LAUDERDALE FL 33304

*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: JOSEPH FUENTES

SECRETARY,  
TREASURER, DIRECTOR

03/31/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date