

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17000035490

Entity Name: ABSOLUTE OF AMERICAS INC.**Current Principal Place of Business:**509 MADISON AVENUE
SUITE 1510
NEW YORK, NY 10022**Current Mailing Address:**509 MADISON AVENUE
SUITE 1510
NEW YORK, NY 10022 US**FEI Number:** 61-1848827**Certificate of Status Desired:** No**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	PRESIDENT, TREASURER
Name	MASTROIANNI, CESARE
Address	VIA F. PETRARCA, 4
City-State-Zip:	PODENZANO 29027

Title	D
Name	GOBBI, PATRIZIA
Address	VIA F. PETRARCA, 4
City-State-Zip:	PODENZANO PC 29027

Title	S
Name	VALLA, ANTONIO
Address	333 BUSH STREET SUITE 2020
City-State-Zip:	SAN FRANCISCO CA 94104

Title	ASST. SECRETARY
Name	GIOVINE, MARCO
Address	333 BUSH STREET SUITE 2020
City-State-Zip:	SAN FRANCISCO CA 94104

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: CESARE MASTROIANNI**PRESIDENT****03/03/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date