

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S68216

Entity Name: GRUPO NELSON INC.

Current Principal Place of Business:

1211 AVENUE OF THE AMERICAS
NEW YORK, NY 10036

Current Mailing Address:

1211 AVENUE OF THE AMERICAS
NEW YORK, NY 10036 US

FEI Number: 65-0281091

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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 DIRECTOR
Name SCHOENWALD, MARK
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036

Title DIRECTOR
Name EDENS, TROY
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036

Title ASSISTANT SECRETARY
Name MERTZ, KENNETH
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036

Title VP
Name GAVENCHAK, EUGENIE C.
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036

Title ASSISTANT SECRETARY
Name COHEN, ELISSA
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036

Title SECRETARY
Name CASSIDY, KYRAN
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036

Title TREASURER
Name GERVASIO, JANET
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036

Title GENERAL COUNSEL
Name GOFF, CHRISTOPHER L.
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036

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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: KENNETH MERTZ

ASSISTANT SECRETARY 04/12/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CONTROLLER
Name SALVI, MICHAEL
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036

Title CFO
Name EDENS, TROY
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036

Title PRESIDENT
Name SCHOENWALD, MARK
Address 1211 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10036