

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0300000174

Entity Name: UNIMAS MIAMI LLC

Current Principal Place of Business:

5999 CENTER DRIVE
LOS ANGELES, CA 90045-8901

Current Mailing Address:

5999 CENTER DRIVE
LOS ANGELES, CA 90045-8901 US

FEI Number: 65-0510876

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

Authorized Person(s) Detail :

Title CHIEF ACCOUNTING OFFICER
Name ENTWISTLE, BOB
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title SR. VICE PRESIDENT
Name ENTWISTLE, BOB
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title CEO
Name SADUSKY, VINCENT
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title SECRETARY
Name SCHWARTZ, JONATHAN
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title CFO
Name LORI, PETER H.
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title CHIEF HUMAN RESOURCES OFFICER
Name LAZO, MARGARET
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title EXEC. VICE PRESIDENT
Name LAZO, MARGARET
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title DIRECTOR
Name SCHWARTZ, JONATHAN
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

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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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOHN PAUL ACEVES

ASST. SECRETARY

04/19/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title DIRECTOR
Name LORI, PETER H.
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title EXEC. VICE PRESIDENT
Name LORI, PETER H.
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title CHIEF LEGAL AND CORPORATE AFFAIRS
OFFICER
Name SCHWARTZ, JONATHAN
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title SR. VICE PRESIDENT
Name IZVERSKY, VLAD
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title ASST. SECRETARY
Name ACEVES, JOHN PAUL
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title EXEC. VICE PRESIDENT
Name SCHWARTZ, JONATHAN
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title CHIEF TAX OFFICER
Name IZVERSKY, VLAD
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901

Title ASST. SECRETARY
Name EVANS, DANIEL
Address 5999 CENTER DRIVE
City-State-Zip: LOS ANGELES CA 90045-8901