

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000005445

Entity Name: MAZZETTI INC.**Current Principal Place of Business:**220 MONTGOMERY STREET
SUITE 650
SAN FRANCISCO, CA 94104**Current Mailing Address:**220 MONTGOMERY STREET
SUITE 650
SAN FRANCISCO, CA 94104 US**FEI Number:** 94-1722463**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

Officer/Director Detail :

Title SECRETARY
Name PAPPAS, JOHN
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR
Name MERCANTE, CYNTHIA
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR
Name DECKARD, DONNA
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR
Name INMAN, JON
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104

Title PRESIDENT
Name VERNON, WALTER N.
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR
Name STAVIG, MARK
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR
Name ATTEBERRY, KARL
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR
Name POLAND, CHRIS
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104

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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: DARRYL WANDRY**TREASURER****04/06/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PAPPAS, JOHN
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104

Title TREASURER
Name WANDRY, DARRYL
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR
Name NUESSEIN, CINDY
Address 220 MONTGOMERY STREET
SUITE 650
City-State-Zip: SAN FRANCISCO CA 94104