

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001693

Entity Name: CORE SECURITY SDI CORPORATION**Current Principal Place of Business:**8845 IRVINE CENTER DRIVE
IRVINE, CA 92618**Current Mailing Address:**8845 IRVINE CENTER DRIVE
IRVINE, CA 92618 US**FEI Number:** 04-3319378**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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 CANO, RON
Address 8845 IRVINE CENTER DRIVE
SUITE 401
City-State-Zip: IRVINE CA 92618

Title DIRECTOR
Name BANERJEE, SUJIT
Address 8845 IRVINE CENTER DRIVE
City-State-Zip: IRVINE CA 92618

Title PRESIDENT, CEO, DIRECTOR
Name RUBAIE, AHMED
Address 8845 IRVINE CENTER DRIVE
City-State-Zip: IRVINE CA 92618

Title SECRETARY, DIRECTOR
Name YU, SIMON
Address 8845 IRVINE CENTER DRIVE
City-State-Zip: IRVINE CA 92618

Title GENERAL COUNSEL
Name GIBSON, PAUL
Address 8845 IRVINE CENTER DRIVE
City-State-Zip: IRVINE CA 92618

Title TREASURER, CFO
Name MOYES, THOMAS
Address 8845 IRVINE CENTER DRIVE
City-State-Zip: IRVINE CA 92618

Title DIRECTOR
Name MALIK, NEIL
Address 1000 HOLCOMB WOODS PARKWAY
SUITE 401
City-State-Zip: ROSWELL GA

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: PAUL GIBSON

GENERAL COUNSEL

03/31/2020

Electronic Signature of Signing Officer/Director Detail

Date