

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003274

Entity Name: COMPAGNIA GENERALE TELEMAR SOCIETA' PER AZIONI, INC.**FILED**
Feb 15, 2017
Secretary of State
CC8621620595**Current Principal Place of Business:**3233 SW 2ND AVENUE
FORT LAUDERDALE, FL 33315**Current Mailing Address:**3233 SW 2ND AVENUE
FORT LAUDERDALE, FL 33315**FEI Number: 45-2835509****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MARK THEISSEN
3233 SW 2ND AVENUE
FORT LAUDERDALE, FL 33315 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 OF THE BOARD
Name	MUSELLA, BRUNO
Address	VIALE TIZIANO 19
City-State-Zip:	ROMA 00916

Title	CEO
Name	CEUPPENS, LUDO ERIK GEERD
Address	VIALE TIZIANO 19
City-State-Zip:	ROMA 00916

Title	DIRECTOR OF THE BOARD
Name	MARCEL, HERVE NAYS CHARLES
Address	VIALE TIZIANO 19
City-State-Zip:	ROMA 00916

Title	BUSINESS DEVELOPMENT MANAGER
Name	THEISSEN, MARK
Address	3233 SW 2ND AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33315

Title	GENERAL PROXY
Name	GIFFORD, ANDREW WILLIS
Address	3233 SW 2ND AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33315

Title	DIRECTOR OF THE BOARD
Name	TORE-MORTEN, OLSEN
Address	VIALE TIZIANO 19
City-State-Zip:	ROMA 00916

Title	DIRECTOR OF THE BOARD
Name	ANDERSEN, STEIN
Address	VIALE TIZIANO 19
City-State-Zip:	ROMA 00916

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: MARK THEISSEN**BUSINESS DEV
MANAGER****02/15/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date