

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000004394

**Entity Name:** SIGMA HOLDINGS USA, INC.

**Current Principal Place of Business:**

SIGMA HOLDINGS USA, INC.  
66 WHITE STREET, UNIT 501  
NEW YORK, NY 10013

**Current Mailing Address:**

SIGMA HOLDINGS USA, INC.  
66 WHITE STREET, UNIT 501  
NEW YORK, NY 10013 US

**FEI Number:** 45-3245291

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

UNITED CORPORATE SERVICES, INC.  
3458 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312 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, PRESIDENT  
Name            DASSI, MATTEO  
Address        SIGMA HOLDINGS USA, INC.  
                  66 WHITE STREET, SUITE 501  
City-State-Zip: NEW YORK NY 10013

Title            D, VP  
Name            DASSI, SIMONE  
Address        SIGMA HOLDINGS USA, INC.  
                  66 WHITE STREET, SUITE 501  
City-State-Zip: NEW YORK NY 10013

Title            S  
Name            GAZZOLA, MARIO  
Address        SIGMA HOLDINGS USA, INC.  
                  66 WHITE STREET, SUITE 501  
City-State-Zip: NEW YORK NY 10013

Title            VP  
Name            DASSI, GIULIANO  
Address        66 WHITE ST, SUITE 501  
City-State-Zip: NEW YORK NY 10013

*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: MARIO GAZZOLA**

**SECRETARY**

**04/27/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date