

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000001663

Entity Name: IBOSS, INC.**Current Principal Place of Business:**9950 SUMMERS RIDGE RD., #160
SAN DIEGO, CA 92121**Current Mailing Address:**9950 SUMMERS RIDGE RD., #160
SAN DIEGO, CA 92121**FEI Number:** 80-0700728**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CT 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 C
Name MARTINI, PAUL
Address 9950 SUMMERS RIDGE RD., #160
City-State-Zip: SAN DIEGO CA 92121

Title VC
Name MARTINI, PETER
Address 9950 SUMMERS RIDGE RD., #160
City-State-Zip: SAN DIEGO CA 92121

Title P
Name MARTINI, PAUL
Address 9950 SUMMERS RIDGE RD., #160
City-State-Zip: SAN DIEGO CA 92121

Title V
Name MARTINI, PETER
Address 9950 SUMMERS RIDGE RD., #160
City-State-Zip: SAN DIEGO CA 92121

Title S
Name SALZMAN, MARISA
Address 9950 SUMMERS RIDGE RD., #160
City-State-Zip: SAN DIEGO CA 92121

Title T
Name MARTINI, PETER
Address 9950 SUMMERS RIDGE RD., #160
City-State-Zip: SAN DIEGO CA 92121

Title AUTHORIZED PERSON
Name MCGRORY, LEANNE
Address FARMERS BANK BUILDING
301 N. MARKET STREET
City-State-Zip: WILMINGTON DE 19801

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: LEANNE C. MCGRORY**AUTHORIZED PERSON****02/28/2017**

Electronic Signature of Signing Officer/Director Detail

Date