

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000001042

**Entity Name:** LYFT FLORIDA, INC.

**Current Principal Place of Business:**

185 BERRY STREET  
SUITE 5000  
SAN FRANCISCO, CA 94107

**Current Mailing Address:**

185 BERRY STREET  
SUITE 5000  
SAN FRANCISCO, CA 94107 US

**FEI Number: NOT APPLICABLE**

**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 ASSISTANT SECRETARY  
Name REAGAN, MATTHEW  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title CHIEF ACCOUNTING OFFICER  
Name BLACKWOOD-KAPRAL, LISA  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title EXECUTIVE VICE PRESIDENT AND  
CHIEF PRODUCT OFFICER  
Name MAKAVY, RAN  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR  
Name WILDEROTTER, MARY AGNES  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR  
Name LAWEE, DAVID  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR  
Name JARRETT, VALERIE  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR  
Name HOROWITZ, BEN  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR  
Name MIURA-KO, ANN  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

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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: KRISTIN SVERCHEK**

**GENERAL COUNSEL AND SECRETARY 05/28/2020**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MIKITANI, HIROSHI  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR  
Name GREEN, LOGAN  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title GENERAL COUNSEL AND SECRETARY  
Name SVERCHEK, KRISTIN  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title CEO  
Name GREEN, LOGAN  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title CHAIRMAN OF THE BOARD  
Name AGGARWAL, PRASHANT (SEAN)  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title DIRECTOR  
Name ZIMMER, JOHN  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title CFO  
Name ROBERTS, BRIAN  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107

Title PRESIDENT  
Name ZIMMER, JOHN  
Address 185 BERRY STREET  
SUITE 5000  
City-State-Zip: SAN FRANCISCO CA 94107