

2018 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: 20-8809830

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

Title SECRETARY
Name SVERCHEK, KRISTIN
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 DIRECTOR
Name AGGARWAL, SEAN
Address 185 BERRY STREET
 SUITE 5000
City-State-Zip: SAN FRANCISCO CA 94107

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

Title DIRECTOR
Name CHRISOTDORO, JONATHAN
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 DIRECTOR
Name HOROWITZ, BEN
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

SECRETARY

04/04/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

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

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