

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000002843

Entity Name: TELESTREAM HOLDINGS CORPORATION**Current Principal Place of Business:**848 GOLD FLAT RD
NEVADA CITY, CA 95959**Current Mailing Address:**848 GOLD FLAT RD
NEVADA CITY, CA 95959 US**FEI Number:** 90-0780496**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T 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 DIRECTOR
Name WEISS, ELI
Address 4 EMBARCADERO CENTER
1900
City-State-Zip: SAN FRANCISCO CA 94111

Title DIRECTOR
Name HANSON, MARK
Address 4 EMBARCADERO CENTER
1900
City-State-Zip: SAN FRANCISCO CA 94111

Title DIRECTOR
Name PUOPOLO, SCOTT
Address 170 FORBES BLVD.
City-State-Zip: MANSFIELD MA 02048

Title DIRECTOR
Name CASTLES, DANIEL
Address 848 GOLD FLAT RD
City-State-Zip: NEVADA CITY CA 95959

Title DIRECTOR
Name MARSHALL, BEN
Address 4 EMBARCADERO CENTER
1900
City-State-Zip: SAN FRANCISCO CA 94111

Title CEO
Name PUOPOLO, SCOTT
Address 170 FORBES BLVD.
City-State-Zip: MANSFIELD MA 02048

Title CFO
Name WHITE, SUSAN
Address 170 FORBES BLVD.
City-State-Zip: MANSFIELD MA 02048

Title DIRECTOR
Name MANKOFF, STEVE
Address FOUR EMBARCADERO CENTER
City-State-Zip: SAN FRANCISCO CA 94111

Continues on page 2

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: SCOTT PUOPOLO**CEO****04/03/2018**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SMITH, CLYDE
Address	848 GOLD FLAT RD
City-State-Zip:	NEVADA CITY CA 95959