

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000003306

Entity Name: ALHI MEXICO, INC.

Current Principal Place of Business:

1 BEACON STREET, 14TH FLOOR
BOSTON, MA 02108

Current Mailing Address:

1 BEACON STREET, 14TH FLOOR
BOSTON, MA 02108 US

FEI Number: 61-1850582

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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
Name DOMINGUEZ, MICHAEL
Address 1 BEACON STREET, 14TH FLOOR
City-State-Zip: BOSTON MA 02108

Title VP, SECRETARY, DIRECTOR
Name BAUMAN, DANIEL
Address 1 BEACON STREET, 14TH FLOOR
City-State-Zip: BOSTON MA 02108

Title TREASURER, CFO
Name MERRYWEATHER , HUGH
Address 1 BEACON STREET, 14TH FLOOR
City-State-Zip: BOSTON MA 02108

Title DIRECTOR
Name DIEKEMPER, GREG
Address 1 BEACON STREET, 14TH FLOOR
City-State-Zip: BOSTON MA 02108

Title DIRECTOR
Name DYER, WILLIAM
Address 1 BEACON STREET, 14TH FLOOR
City-State-Zip: BOSTON MA 02108

Title DIRECTOR
Name GABRI, DAVID G
Address 1 BEACON STREET, 14TH FLOOR
City-State-Zip: BOSTON MA 02108

Title DIRECTOR
Name LEIMAN, JONATHAN
Address 1 BEACON STREET, 14TH FLOOR
City-State-Zip: BOSTON MA 02108

Title DIRECTOR
Name OLSEN, ANDREW
Address 1 BEACON STREET, 14TH FLOOR
City-State-Zip: BOSTON MA 02108

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: DANIEL BAUMAN

VP AND SECRETARY

04/21/2020

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date