

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000050676

Entity Name: NEORIS USA, INC.**Current Principal Place of Business:**1395 BRICKELL AVE.
500
MIAMI, FL 33131**Current Mailing Address:**PO BOX 1500
HOUSTON, TX 77251**FEI Number:** 65-1052482**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**GARZA, ALEJANDRO SR.
1395 BRICKELL AVE.
500
MIAMI, FL 33131 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:** ALEJANDRO GARZA

05/11/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO AND PRESIDENT
Name MENDEZ, MARTIN MIGUEL
Address 1395 BRICKELL AVE.
500
City-State-Zip: MIAMI FL 33131

Title CFO
Name TASSINARI, HECTOR
Address 1395 BRICKELL AVE.
500
City-State-Zip: MIAMI FL 33131

Title CHIEF MARKETING OFFICER
Name GOMES DA COSTA, MARCELO
Address 1395 BRICKELL AVE.
500
City-State-Zip: MIAMI FL 33131

Title CHIEF HUMAN CAPITAL OFFICER
Name FISCHETTI, MARTIN
Address 1395 BRICKELL AVE.
500
City-State-Zip: MIAMI FL 33131

Title SECRETARY
Name GARZA HERNANDEZ, ALEJANDRO
Address 1395 BRICKELL AVE.
500
City-State-Zip: MIAMI FL 33131

Title PRESIDENT US REGION
Name DELIMA, ANTHONY
Address 1395 BRICKELL AVE.
500
City-State-Zip: MIAMI FL 33131

Title CHIEF OPERATION OFFICER AND
TREASURER
Name SAUL, MAURICIO
Address 1395 BRICKELL AVE.
500
City-State-Zip: MIAMI FL 33131

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: ALEJANDRO GARZA HERNANDEZ

05/11/2020

Electronic Signature of Signing Officer/Director Detail

Date