

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000031587

Entity Name: NOSTROMO NORTH AMERICA INC.**Current Principal Place of Business:**NOSTROMO C/O GRUPO CALVO
VIA DE LOS POBLADOS 1 5A PLANTA, EDIFICIO A/B
MADRID, 28042**Current Mailing Address:**515 CALMWATER LN
ALPHARETTA, GA 30022 US**FEI Number:** 90-0152324**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ML RIVERO AND ASSOCIATES
1313 PONCE DE LEON BLVD
SUITE 201
CORAL GABLES, FL 33134 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:** MANUEL RIVERO**03/27/2017**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name CALVO GARCIA-BENAVID, MANUEL
Address VIA DE LOS POBLADOS 1
5A PLANTA, EDIFICIO A/B
City-State-Zip: MADRID 28042

Title VP
Name PENALVA ARIGITA, MIGUEL A
Address VIA DE LOS POBLADOS 1
5A PLANTA, EDIFICIO A/B
City-State-Zip: MADRID 28042

Title T
Name LLANAS CARVAJAL, DAVID
Address VIA DE LOS POBLADOS 1
5A PLANTA, EDIFICIO A/B
City-State-Zip: MADRID 28042

Title S
Name CASAS ROBLA, JESUS
Address VIA DE LOS POBLADOS 1
5A PLANTA, EDIFICIO A/B
City-State-Zip: MADRID 28042

Title VP
Name PEREZ, VICTOR
Address VIA DE LOS POBLADOS 1
5A PLANTA, EDIFICIO A/B
City-State-Zip: MADRID 28042

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: VICTOR PEREZ

VP

03/27/2017

Electronic Signature of Signing Officer/Director Detail

Date