

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000045846

Entity Name: HUBLOT OF AMERICA, INC.**Current Principal Place of Business:**100 N. BISCAYNE BOULEVARD
SUITE 1900
MIAMI, FL 33132**Current Mailing Address:**100 N. BISCAYNE BOULEVARD
SUITE 1900
MIAMI, FL 33132 US**FEI Number:** 65-0507660**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE, FL 32301 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, CHAIRMAN, PRESIDENT
Name BIVER, JEAN C
Address HUBLOT SA-ROUTE DE DIVONNE 44
City-State-Zip: NYON SWITZERLAND 1260

Title EVP
Name GUADALUPE, RICARDO
Address HUBLOT SA-ROUTE DE DIVONNE 44
City-State-Zip: NYON SWITZERLAND 1260

Title S
Name FIRESTONE, LOUISE
Address 19 EAST 57TH STREET
City-State-Zip: NEW YORK NY 10022

Title DIRECTOR
Name GUADALUPE, RICARDO
Address HUBLOT SA-ROUTE DE DIVONNE 44
City-State-Zip: NYON SWITZERLAND 1260

Title SENIOR VICE PRESIDENT
Name SBERRO, JEAN FRANCOIS
Address 100 N. BISCAYNE BOULEVARD
SUITE 1900
City-State-Zip: MIAMI FL 33132

Title DIRECTOR
Name BARRE, CHRISTOPHE
Address HUBLOT SA-ROUTE DE DIVONNE 44
City-State-Zip: NYON SWITZERLAND 1260

Title TREASURER
Name LANDEROIN, CHRISTELLE
Address 100 N. BISCAYNE BOULEVARD
SUITE 1900
City-State-Zip: MIAMI FL 33132

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: LOUISE FIRESTONE**SECRETARY****01/06/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date