

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000001607

**Entity Name:** ZONAMOVIL, INC.**Current Principal Place of Business:**7705 NW 29TH STREET  
106  
DORAL, FL 33122**Current Mailing Address:**KAULBACHSTR. 85  
C/O TIAXA  
MUNICH, BAVARIA 80802 DE**FEI Number:** 65-0992571**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CORPDIRECT AGENTS  
1200 SOUTH PINE ISLAND ROAD  
LOWER LEVEL  
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           | MR                   |
| Name            | VALDES, FELIPE       |
| Address         | WILHELMSTRASSE 19    |
| City-State-Zip: | MUNICH BAVARIA 80801 |

|                 |                      |
|-----------------|----------------------|
| Title           | MR                   |
| Name            | CARLSEN, SVEND OLAV  |
| Address         | KAULBACHSTRASSE 85   |
| City-State-Zip: | MUNICH BAVARIA 80802 |

|                 |                                            |
|-----------------|--------------------------------------------|
| Title           | MR                                         |
| Name            | GUTIERREZ, SERGIO                          |
| Address         | RICARDO LYON 222<br>SUITE 204, PROVIDENCIA |
| City-State-Zip: | SANTIAGO                                   |

|                 |                                            |
|-----------------|--------------------------------------------|
| Title           | MR                                         |
| Name            | GONZALEZ, RAUL                             |
| Address         | RICARDO LYON 222<br>SUITE 204, PROVIDENCIA |
| City-State-Zip: | SANTIAGO                                   |

|                 |                                  |
|-----------------|----------------------------------|
| Title           | DIRECTOR                         |
| Name            | WILLIAMS, ANN                    |
| Address         | RUA TATUI 89<br>JARDIMS PAULISTA |
| City-State-Zip: | SAO PAULO SAO PAULO 01409        |

|                 |                    |
|-----------------|--------------------|
| Title           | DIRECTOR           |
| Name            | HERRERA, MIGUEL    |
| Address         | 104 CHURCHILL AVE  |
| City-State-Zip: | ARLINGTON MA 02476 |

*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:** SVEND OLAV CARLSEN

CFO

04/05/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date