

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000000895

**Entity Name:** ATEME, INCORPORATED**Current Principal Place of Business:**750 W. HAMPTON AVENUE,  
SUITE 290  
ENGLEWOOD, CO 80110**Current Mailing Address:**750 W. HAMPTON AVENUE,  
SUITE 290  
ENGLEWOOD, CO 80110 US**FEI Number:** 75-3255579**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.  
2894 REMINGTON GREEN LN STE A  
TALLAHASSEE, FL 32308 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	CEO
Name	ARTIERES, MICHEL
Address	750 W. HAMPTON AVENUE, SUITE 290
City-State-Zip:	ENGLEWOOD CO 80110

Title	SCTY
Name	SANA , FABRICE
Address	750 W. HAMPTON AVENUE, SUITE 290
City-State-Zip:	ENGLEWOOD CO 80110

Title	CFO
Name	SANA, FABRICE
Address	750 W. HAMPTON AVENUE, SUITE 290
City-State-Zip:	ENGLEWOOD CO 80110

Title	DIRECTOR
Name	ARTIERES, MICHEL
Address	750 W. HAMPTON AVENUE, SUITE 290
City-State-Zip:	ENGLEWOOD CO 80110

*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:** FABRICE SANA**SECRETARY****02/29/2024**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date