## 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000000351

Entity Name: FIRCOSOFT, INC.

**Current Principal Place of Business:** 

230 PARK AVE SEVENTH FLOOR NEW YORK, NY 10169

**Current Mailing Address:** 

1105 NORTH MARKET ST SUITE 501

WIMLINGTON, DE 19801 US

FEI Number: 06-1420592 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM C/O C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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

**FILED** Jan 25, 2016

**Secretary of State** 

CC7349945783

Officer/Director Detail:

Title **PRESIDENT** Title DIRECTOR

Name O'SULLIVAN, JAMIE Name FELTHAM, DOMINIC Address

**QUADRANT HOUSE QUADRANT HOUSE** Address THE QUADRAND THE QUADRANT

City-State-Zip: SUTTON SUTTON SURREY SM2 5AS City-State-Zip: SUTTON SUTTON SURREY SM2 5AS

Title TREASURER, DIRECTOR Title DIRECTOR, SECRETARY Name FOGARTY, KENNETH Name GOLDWEITZ, JULIE Address 313 WASHINGTON ST Address 230 PARK AVE

City-State-Zip: NEW YORK NY 10169 City-State-Zip: NEWTON MA 02458

Title **DIRECTOR** Title VΡ

Name SIMONTON, RENEE THOMPSON, KENNETH Name

9443 SPRINGBORO PIKE Address 1105 NORTH MARKET ST Address

SUITE 501

MIAMISBURG OH 45342 City-State-Zip: City-State-Zip: WILMINGTON DE 19801

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.