

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000004719

Entity Name: UBER TECHNOLOGIES, INC.**Current Principal Place of Business:**1455 MARKET STREET
4TH FLOOR
SAN FRANCISCO, CA 94103**Current Mailing Address:**1455 MARKET STREET
4TH FLOOR
SAN FRANCISCO, CA 94103 US**FEI Number:** 45-2647441**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT 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**Officer/Director Detail :**

Title	DIRECTOR
Name	GURLEY, J. WILLIAM
Address	1455 MARKET STREET 4TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94103

Title	DIRECTOR
Name	KALANICK, TRAVIS
Address	1455 MARKET STREET 4TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94103

Title	PRESIDENT / CEO
Name	KALANICK, TRAVIS
Address	1455 MARKET STREET 4TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94103

Title	SECRETARY
Name	KALANICK, TRAVIS
Address	1455 MARKET STREET 4TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94103

Title	TREASURER / CFO
Name	GUPTA, GAUTAM
Address	1455 MARKET STREET 4TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94103

Title	VP, OPERATIONS
Name	GRAVES, RYAN
Address	1455 MARKET STREET 4TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94103

Title	DIRECTOR
Name	BONDERMAN, DAVID
Address	1455 MARKET STREET 4TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94103

Title	DIRECTOR
Name	CAMP, GARRETT
Address	1455 MARKET STREET 4TH FLOOR
City-State-Zip:	SAN FRANCISCO CA 94103

Continues on page 2

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: TRAVIS KALANICK**SECRETARY****04/12/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DRUMMOND, DAVID C.
Address 1455 MARKET STREET
 4TH FLOOR
City-State-Zip: SAN FRANCISCO CA 94103

Title DIRECTOR
Name GRAVES, RYAN
Address 1455 MARKET STREET
 4TH FLOOR
City-State-Zip: SAN FRANCISCO CA 94103