

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000002737

Entity Name: RIMINI STREET, INC.**Current Principal Place of Business:**1700 S. PAVILION CENTER DRIVE
SUITE 330
LAS VEGAS, NV 89135**Current Mailing Address:**1700 S. PAVILION CENTER DRIVE
SUITE 330
LAS VEGAS, NV 89135 US**FEI Number:** 36-4880301**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**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

Officer/Director Detail :

Title	PRESIDENT & CEO
Name	RAVIN, SETH
Address	1700 S. PAVILION CENTER DRIVE SUITE 330
City-State-Zip:	LAS VEGAS NV 89135

Title	TREASURER/CFO
Name	PERICA, MICHAEL
Address	1700 S. PAVILION CENTER DRIVE SUITE 330
City-State-Zip:	LAS VEGAS NV 89135

Title	SECRETARY
Name	TERRY, ANDREW
Address	1700 S. PAVILION CENTER DRIVE SUITE 330
City-State-Zip:	LAS VEGAS NV 89135

Title	DIRECTOR
Name	ACOSTA, JACK L.
Address	1700 S. PAVILION CENTER DRIVE SUITE 330
City-State-Zip:	LAS VEGAS NV 89135

Title	DIRECTOR
Name	CAPELLI, STEVE
Address	1700 S. PAVILION CENTER DRIVE SUITE 330
City-State-Zip:	LAS VEGAS NV 89135

Title	DIRECTOR
Name	MURRAY, ROBIN
Address	1700 S. PAVILION CENTER DRIVE SUITE 330
City-State-Zip:	LAS VEGAS NV 89135

Title	DIRECTOR
Name	RAVIN, SETH
Address	1700 S. PAVILION CENTER DRIVE SUITE 330
City-State-Zip:	LAS VEGAS NV 89135

Title	DIRECTOR
Name	SNYDER, JAY
Address	1700 S. PAVILION CENTER DRIVE SUITE 330
City-State-Zip:	LAS VEGAS NV 89135

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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: ANDREW TERRY**SECRETARY****04/16/2024**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MCCALLUM, KATRINKA
Address	1700 S. PAVILION CENTER DRIVE SUITE 330
City-State-Zip:	LAS VEGAS NV 89135