2025 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 Title TREASURER/CFO

Name RAVIN, SETH Name PERICA, MICHAEL

Address 1700 S. PAVILION CENTER DRIVE Address 1700 S. PAVILION CENTER DRIVE

SUITE 330 SUITE 330

City-State-Zip: LAS VEGAS NV 89135 City-State-Zip: LAS VEGAS NV 89135

Title DIRECTOR Title DIRECTOR

Name ACOSTA, JACK L. Name CAPELLI, STEVE

Address 1700 S. PAVILION CENTER DRIVE Address 1700 S. PAVILION CENTER DRIVE

SUITE 330 SUITE 330

City-State-Zip: LAS VEGAS NV 89135 City-State-Zip: LAS VEGAS NV 89135

TitleDIRECTORTitleDIRECTORNameMURRAY, ROBINNameRAVIN, SETH

Address 1700 S. PAVILION CENTER DRIVE Address 1700 S. PAVILION CENTER DRIVE

SUITE 330 SUITE 330

City-State-Zip: LAS VEGAS NV 89135 City-State-Zip: LAS VEGAS NV 89135

Title DIRECTOR Title SECRETARY

Name SNYDER, JAY Name PEIFFER, CELESTE RASMUSSEN

Address 1700 S. PAVILION CENTER DRIVE Address 1700 S. PAVILION CENTER DRIVE

SUITE 330 SUITE 330

City-State-Zip: LAS VEGAS NV 89135 City-State-Zip: LAS VEGAS NV 89135

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: CELESTE RASMUSSEN PEIFFER SECRETARY

Electronic Signature of Signing Officer/Director Detail

03/18/2025

FILED Mar 18, 2025

Secretary of State

3107207975CC

Date