2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000002942

Entity Name: MILLICOM INTERNATIONAL CELLULAR S.A. CORP

FILED
Feb 25, 2025
Secretary of State
7339934678CC

Current Principal Place of Business:

8400 N.W. 36TH STREET
SUITE 530
MIAMI, FL 33166

Current Mailing Address:

8400 N.W. 36TH STREET
SUITE 530
MIAMI, FL 33166 US

FEI Number: 98-0390444

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MAIORI, MARIA FLORENCIA
8400 NW 36TH STREET.
SUITE 530
DORAL, FL 33136 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: MARIA FLORENCIA MAIORI 02/25/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIRECTOR
Name	ELIASSON, TOMAS
Address	2, RUE DU FORT BOURBON
City-State-Zip:	LUXEMBOURG L-1249

Title	DIRECTOR
Name	CHURCHILL, BRUCE
Address	2, RUE DU FORT BOURBON
City-State-Zip:	LUXEMBOURG L-1249

Title	DIRECTOR
Name	TREVIÑO DE VEGA, BLANCA
Address	2, RUE DU FORT BOURBON
City-State-Zip:	LUXEMBOURG L-1249

Title	OFFICER
Name	VANHAEREN, BART KRISTOF
Address	2, RUE DU FORT BOURBON
City-State-Zip:	LUXEMBOURG L-1249

Title	OFFICER
Name	ESCALON , SALVADOR
Address	2, RUE DU FORT BOURBON
City-State-Zip:	LUXEMBOURG L-1249

Title	DIRECTOR
Name	ARNAL, MARIA TERESA
Address	2, RUE DU FORT BOURBON
City-State-Zip:	LUXEMBOURG L-1249

Title	OFFICER
Name	VIANNA, CELSO
Address	2, RUE DU FORT BOURBON
City-State-Zip:	LUXEMBOURG L-1249

Title	DIRECTOR
Name	DIMOVIC, JUSTINE
Address	2, RUE DU FORT BOURBON
City-State-Zip:	LUXEMBOURG L-1249

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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: MARIA FLORENCIA MAIORI OFFICER 02/25/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title DIRECTOR
Name LOMBARDINI, MAXIME
Address 2, RUE DU FORT BOURBON
City-State-Zip: LUXEMBOURG L-1249

Title OFFICER
Name BERNAL, CAROLINA
Address 2, RUE DU FORT BOURBON
City-State-Zip: LUXEMBOURG L-1249

Title DIRECTOR
Name DURAND, PIERRE-EMMANUEL
Address 8400 N.W. 36TH STREET
SUITE 530
City-State-Zip: MIAMI FL 33166

Title OFFICER
Name BRAGGION, ALESSANDRA
Address 8400 N.W. 36TH STREET
SUITE 530
City-State-Zip: MIAMI FL 33166

Title CEO
Name BENITEZ, MARCELO
Address 2, RUE DU FORT BOURBON
City-State-Zip: LUXEMBOURG L-1249

Title DIRECTOR
Name NIEL, JULES
Address 8400 N.W. 36TH STREET
SUITE 530
City-State-Zip: MIAMI FL 33166

Title OFFICER
Name MAIORI, MARIA FLORENCIA
Address 8400 N.W. 36TH STREET
SUITE 530
City-State-Zip: MIAMI FL 33166

Title OFFICER
Name ZANDONA, GUSTAVO
Address 8400 N.W. 36TH STREET
SUITE 530
City-State-Zip: MIAMI FL 33166