

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004670

Entity Name: ALORICA CUSTOMER CARE, INC.

Current Principal Place of Business:

5 PARK PLAZA
SUITE 1100
IRVINE, CA 92614

Current Mailing Address:

5 PARK PLAZA
SUITE 1100
IRVINE, CA 92614 US

FEI Number: 23-2250564

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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, DIRECTOR
Name HALE, LANCE
Address 5 PARK PLAZA
 SUITE 1100
City-State-Zip: IRVINE CA 92614

Title SECRETARY, DIRECTOR
Name PAN, ELIZABETH (CECE)
Address 5 PARK PLAZA
 SUITE 1100
City-State-Zip: IRVINE CA 92614

Title TREASURER, DIRECTOR
Name FIORILLO, CINDY
Address 5 PARK PLAZA
 SUITE 1100
City-State-Zip: IRVINE CA 92614

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: ELIZABETH (CECE) PAN

SECRETARY

01/11/2018

Electronic Signature of Signing Officer/Director Detail

Date