

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P17395

Entity Name: TECHNICOLOR USA, INC.**Current Principal Place of Business:**6040 SUNSET BLVD
HOLLYWOOD, CA 90028**Current Mailing Address:**2255 N. ONTARIO STREET
SUITE 250
BURBANK, CA 91504 US**FEI Number:** 35-1724835**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DR.
STE A
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	P
Name	MOAT, RICHARD
Address	8 RUE DU RENARD
City-State-Zip:	PARIS 75004

Title	DIRECTOR
Name	COLLIER, MARY
Address	3233 E. MISSION OAKS BLVD
City-State-Zip:	CAMARILLO CA 93012

Title	VP, DIRECTOR
Name	SARNOFF, TIM
Address	6040 SUNSET BLVD
City-State-Zip:	HOLLYWOOD CA 90028

Title	VP
Name	LILLY, QUENTIN
Address	3233 E. MISSION OAKS BLVD
City-State-Zip:	CAMARILLO CA 93012

Title	TREASURER
Name	SHA, CAROLYN
Address	3281 GUASTI DRIVE SITE 746
City-State-Zip:	ONTARIO CA 91761

Title	DIRECTOR OF TAX
Name	FEINBERG, JANE
Address	2255 N. ONTARIO STREET
City-State-Zip:	BURBANK CA 91504

Title	SECRETARY, DIRECTOR
Name	WINDERS, KATE
Address	6040 SUNSET BLVD
City-State-Zip:	HOLLYWOOD CA 90028

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: JANE FEINBERG**TAX OFFICER****03/16/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date