# 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000004454

Entity Name: S2 GLOBAL, INC.

### **Current Principal Place of Business:**

12525 CHADRON AVENUE HAWTHORNE, CA 90250

### **Current Mailing Address:**

12525 CHADRON AVENUE HAWTHORNE, CA 90250 US

## FEI Number: 20-5153558

### Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S PINE ISLAND RD #250 PLANTATION, FL 33324 US

Certificate of Status Desired: No

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

### **Officer/Director Detail :**

| Title           | PRESIDENT            | Title           | CFO                  |
|-----------------|----------------------|-----------------|----------------------|
| Name            | FLEMMING, JONATHAN   | Name            | LUIZ, ERIC           |
| Address         | 12525 CHADRON AVENUE | Address         | 12525 CHADRON AVENUE |
| City-State-Zip: | HAWTHORNE CA 90250   | City-State-Zip: | HAWTHORNE CA 90250   |
| Title           | DIRECTOR             | Title           | DIRECTOR             |
| Name            | MEHRA, AJAY          | Name            | WILLIAMSON, PETER    |
| Address         | 12525 CHADRON AVENUE | Address         | 12525 CHADRON AVENUE |
| City-State-Zip: | HAWTHORNE CA 90250   | City-State-Zip: | HAWTHORNE CA 90250   |
| Title           | SECRETARY            |                 |                      |
| Name            | SZE, VICTOR          |                 |                      |
| Address         | 12525 CHADRON AVENUE |                 |                      |
| City-State-Zip: | HAWTHORNE CA 90250   |                 |                      |

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: VICTOR SZE

SECRETARY

02/01/2017

Date

Electronic Signature of Signing Officer/Director Detail

Date

# FILED Feb 01, 2017 Secretary of State CC6495035376