## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000001030

Entity Name: OCWEN BUSINESS SOLUTIONS, INC.

**FILED** Apr 20, 2018 Secretary of State CC2728455936

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

TWO E-COM CENTER, HARBOR DRIVE.

MALL OF ASIA COMPLEX PASAY CITY, MANILA

## **Current Mailing Address:**

TWO E-COM CENTER, HARBOR DRIVE, MALL OF ASIA COMPLEX PASAY CITY, MANILA PH

FEI Number: 98-1219834 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MALL OF ASIA COMPLEX

MALL OF ASIA COMPLEX

DRIVE

above, or on an attachment with all other like empowered.

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 **DIRECTOR** Title DIRECTOR Name GUILATCO, PATRICIA ANN L. Name PO. PEPITO G.

Address TWO E-COM CENTER, HARBOR Address TWO E-COM CENTER, HARBOR DRIVE

DRIVE

MALL OF ASIA COMPLEX MALL OF ASIA COMPLEX

PASAY CITY MANILA City-State-Zip: PASAY CITY MANILA City-State-Zip:

Title **DIRECTOR** Title TREASURER / DIRECTOR Name BERNALDO, ROSARIO S. Name BERNALDO, ROSARIO S.

Address TWO E-COM CENTER, HARBOR Address TWO E-COM CENTER, HARBOR

**DRIVE DRIVE** 

MALL OF ASIA COMPLEX MALL OF ASIA COMPLEX

PASAY CITY MANILA PASAY CITY MANILA City-State-Zip: City-State-Zip:

Title DIRECTOR Title **DIRECTOR** 

WALKER, ARTHUR C. JR. SARUKKAI PARTHASARATHY, RAVI Name Name

Address TWO E-COM CENTER, HARBOR Address TWO E-COM CENTER, HARBOR DRIVE.

DRIVE MALL OF ASIA COMPLEX

PASAY CITY MANILA PASAY CITY MANILA City-State-Zip: City-State-Zip:

Title PRESIDENT / DIRECTOR Title **SECRETARY** 

GUILATCO, PATRICIA ANN L. MALLARI, IANNE JOY R. Name Name

Address TWO E-COM CENTER, HARBOR Address TWO E-COM CENTER, HARBOR

> DRIVE MALL OF ASIA COMPLEX

City-State-Zip: PASAY CITY MANILA City-State-Zip: PASAY CITY MANILA

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

**SECRETARY** 04/20/2018 SIGNATURE: IANNE JOY R. MALLARI

Electronic Signature of Signing Officer/Director Detail

Date