No. C 155856		Due no later than Aug 31, 2018		2. Registered Age	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		Annual Report Form 1. Mailing Address: Correct in this box if needed. CITICORP USA, INC. TAX AND REPORTING PO BOX 30509 TAMPA FL 33630 USA		921 S ORCHAF BOISE ID 83	C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*			
RECEIVED BY DUE DATE								
4. Corporations: Enter Na	ames and Busin	ess Addresses of Pres	ident, Secretary, and Directors. Treasui	rer (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	JEROEN FIKI	KE	388 GREENWICH STREET	NEW YORK	NY	USA	10013	
DIRECTOR	EVELYN HAV	/ASI	388 GREENWICH STREET	NEW YORK	NY	USA	10013	
TREASURER	VICTOR SPADAFORA		1 COURT SQUARE	LONG ISLAND CITY	NY	USA	11101	
SECRETARY	JOSEPH B WOLLARD		388 GREENWICH STREET	NEW YORK	NY	USA	10013	
PRESIDENT	JEROEN FIKKE		388 GREENWICH STREET	NEW YORK	NY	USA	10013	
DIRECTOR	JOSEPH TREDICI		111 WALL STREET	NEW YORK	NY	USA	10005	
DIRECTOR PETER O'CONNOR		NNOR	388 GREENWICH STREET	NEW YORK	NY	USA	10013	
DIRECTOR	CAROLYN SI	HERIDAN	227 WEST MONROE STREET	CHICAGO	IL	USA	60606	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
DE		Signature: JULIE SCHMIDT		Date: 08/09/20	Date: 08/09/2018			
C 155856		Name (type or print): JULIE SCHMIDT		Title: ASSISTANT TAX OFFICER				
Processed 08/09/2018		* Electronically provided signatures are accepted as original signatures.						