

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 584709

Entity Name: ORION INVESTMENT AND MANAGEMENT LTD. CORP.**Current Principal Place of Business:**200 SO. BISCAYNE BLVD
7TH FLOOR
MIAMI, FL 33131**Current Mailing Address:**200 SO. BISCAYNE BLVD
7TH FLOOR
MIAMI, FL 33131 US**FEI Number:** 59-1845874**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROWN, B. MACKAY
200 SO. BISCAYNE BLVD
7TH FLOOR
MIAMI, FL 33131 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	PD
Name	SANZ, JOSEPH
Address	200 SO. BISCAYNE BLVD 7TH FLOOR
City-State-Zip:	MIAMI FL 33131

Title	SVP
Name	BUHRMASTER, NORMAN J
Address	200 SO. BISCAYNE BLVD 7TH FLOOR
City-State-Zip:	MIAMI FL 33131

Title	AS
Name	BROWN, B. M
Address	200 SO. BISCAYNE BLVD 7TH FLOOR
City-State-Zip:	MIAMI FL 33131

Title	V
Name	SANZ, KEVIN J
Address	200 SO. BISCAYNE BLVD 7TH FLOOR
City-State-Zip:	MIAMI FL 33131

Title	V
Name	SANZ, CHRISTOPHER D
Address	200 S. BISCAYNE BLVD. 7TH FLOOR
City-State-Zip:	MIAMI FL 33131

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: SANZ , JOSEPH

PD

02/21/2019

Electronic Signature of Signing Officer/Director Detail_____
Date