

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S09965

Entity Name: I.T.N. OF MIAMI, INC.**Current Principal Place of Business:**2800 S. ANDREWS AVENUE
FORT LAUDERDALE, FL 33316**Current Mailing Address:**2800 S. ANDREWS AVENUE
C/O RISK MGMT
FORT LAUDERDALE, FL 33316 US**FEI Number:** 65-0225893**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
C/O CT 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	COO
Name	GRIMES, DANIEL
Address	2800 S. ANDREWS AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	VP
Name	GARCIA, JUAN A
Address	2800 S. ANDREWS AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	TREASURER, CFO
Name	NASH, JOHN R
Address	2800 S. ANDREWS AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	PRESIDENT, CEO, DIRECTOR
Name	KARJIAN, VICKEN
Address	2800 S. ANDREWS AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	SECRETARY, VP
Name	CANNY, JOAN
Address	2800 S. ANDREWS AVENUE
City-State-Zip:	FORT LAUDERDALE FL 33316

Title	DIRECTOR
Name	HORNE, ROBERT
Address	340 MADISON AVENUE 19TH FLOOR
City-State-Zip:	NEW YORK NY 10173

Title	DIRECTOR
Name	LEHRHOFF, ADAM
Address	340 MADISON AVENUE 19TH FLOOR
City-State-Zip:	NEW YORK NY 10173

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: JOHN R. NASH

TREASURER

04/11/2017

Electronic Signature of Signing Officer/Director Detail_____
Date