## **2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000000450

Entity Name: INRIX, INC.

**Current Principal Place of Business:** 

10210 NE POINTS DR

KIRKLAND, WA 98033

SUITE 400

**Current Mailing Address:** 

10210 NE POINTS DR SUITE 400

KIRKLAND, WA 98033 US

FEI Number: 20-1296081 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 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

**FILED** Feb 06, 2019

**Secretary of State** 

8461142002CC

Officer/Director Detail:

SUITE 400

Title CEO Title DIRECTOR

MISTELE, BRYAN P Name Name AGARWAL, AJAY

Address 10210 NE POINTS DRIVE Address 10210 NE POINTS DR

SUITE 400

KIRKLAND WA 98033 KIRKLAND WA 98033 City-State-Zip: City-State-Zip:

Title DIRECTOR Title DIRECTOR

ASCHER, BRIAN VANDERMEULEN, KENDRA Name Name

10210 NE POINTS DR 10210 NE POINTS DR Address Address

SUITE 400 SUITE 400

City-State-Zip: KIRKLAND WA 98033 City-State-Zip: KIRKLAND WA 98033

Title **DIRECTOR** Title DIRECTOR

IRVINE, DIANE JOHNSTON, JOHN Name Name

10210 NE POINTS DR 10210 NE POINTS DR Address Address

SUITE 400 SUITE 400

City-State-Zip: KIRKLAND WA 98033 City-State-Zip: KIRKLAND WA 98033

Title **SECRETARY** Title **DIRECTOR** Name LINDSAY, KRISTIN Name GERLING, MIKE

Address 10210 NE POINTS DR 10210 NE POINTS DR Address

> SUITE 400 SUITE 400

City-State-Zip: KIRKLAND WA 98033 City-State-Zip: KIRKLAND WA 98033

## Continues on page 2

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.

02/06/2019 SIGNATURE: RYAN HJORTEN INTERIM CFO

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name POSAWATZ, TONY

Address 10210 NE POINTS DR

SUITE 400

City-State-Zip: KIRKLAND WA 98033

Title INTERIM CFO
Name HJORTEN, RYAN

Address 10210 NE POINTS DR

SUITE 400

City-State-Zip: KIRKLAND WA 98033

Title DIRECTOR

Name VON HAGEN, PHILIPP

Address 10210 NE POINTS DR

SUITE 400

City-State-Zip: KIRKLAND WA 98033