

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 800993

**FILED  
Jan 15, 2018  
Secretary of State  
CC4243196641**

**Entity Name:** MIAMI CORPORATION

**Current Principal Place of Business:**

C/O DAVID C. FUECHTMAN  
410 N MICHIGAN AVE, ROOM 590  
CHICAGO, IL 60611

**Current Mailing Address:**

C/O DAVID C. FUECHTMAN  
410 N MICHIGAN AVE, ROOM 590  
CHICAGO, IL 60611 US

**FEI Number:** 36-1472840

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROWN, MICHAEL A  
3450 OLD DAWSON RANCH ROAD  
EDGEWATER, FL 32132 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 PCEO  
Name RAU, JOHN  
Address 410 N MICHIGAN AVE, RM 590  
City-State-Zip: CHICAGO IL 60611

Title EVP  
Name WEDDIGE, DAVID  
Address 410 N MICHIGAN AVE, RM 590  
City-State-Zip: CHICAGO, IL 60611

Title EVP  
Name HOGAN, RICHARD F  
Address 410 N MICHIGAN AVE, RM 590  
City-State-Zip: CHICAGO IL 60611

Title SVP  
Name PATTOCK, SUSAN D  
Address 410 N MICHIGAN AVE, RM 590  
City-State-Zip: CHICAGO IL 60611

Title EVPS  
Name FUECHTMAN, DAVID C  
Address 410 N MICHIGAN AVE, RM 590  
City-State-Zip: CHICAGO IL 60611

Title VP  
Name SHIRING, JR., MARTIN  
Address 410 N MICHIGAN AVE, RM 590  
City-State-Zip: CHICAGO IL 60611

*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:** DAVID C. FUECHTMAN

**EXECUTIVE VICE  
PRESIDENT**

**01/15/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date