

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000004927

Entity Name: CITISHARE CORPORATION

Current Principal Place of Business:

388 GREENWICH STREET
NEW YORK, NY 10013

Current Mailing Address:

PO BOX 30509
TAX AND REPORTING
TAMPA, FL 33630 US

FEI Number: 13-2982159

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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 DIRECTOR
Name GARZA, ELIZABETH
Address 388 GREENWICH STREET
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR, CHAIRMAN
Name GOPALAKRISHNAN, MANOJ
Address 388 GREENWICH STREET
City-State-Zip: NEW YORK NY 10013

Title TREASURER
Name ROSIER, ALCINDOR
Address 2 COURT SQUARE
City-State-Zip: LONG ISLAND CITY NY 11101

Title CFO
Name NERI, NERI
Address 388 GREENWICH STREET
City-State-Zip: NEW YORK NY 10013

Title SECRETARY
Name SCRUTON, MICHELE
Address 388 GREENWICH STEET
City-State-Zip: NEW YORK NY 10013

Title ASSISTANT TAX OFFICER
Name SCHMIDT, JULIE
Address 8800 HIDDEN RIVER PARKWAY
City-State-Zip: TAMPA FL 33637

Title DIRECTOR, PRESIDENT, CEO
Name CROWLEY, RYAN
Address 4400 EASTON COMMONS
City-State-Zip: COLUMBUS OH 43219

Title DIRECTOR
Name SMITH, DAVID
Address 6400 LAS COLINAS BLVD
City-State-Zip: IRVING TX 75039

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: JULIE SCHMIDT

ASSISTANT TAX OFFICER 04/16/2021

Electronic Signature of Signing Officer/Director Detail

Date