

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F92000000596

Entity Name: CITIGROUP INC.**Current Principal Place of Business:**388 GREENWICH ST
NEW YORK, NY 10013**Current Mailing Address:**P.O. BOX 30509
TAX & REPORTING
TAMPA, FL 33631 US**FEI Number:** 52-1568099**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, CEO
Name CORBAT, MICHAEL L
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR
Name O'NEILL, MICHAEL E
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

Title DIRECTOR
Name MCQUADE, EUGENE
Address 399 PARK AVE
City-State-Zip: NEW YORK NY 10022

Title TREASURER
Name VON MOLTKE, JAMES
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

Title SECRETARY
Name WEERASINGHE, ROHAN
Address 388 GREENWICH ST
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 CFO
Name GERSPACH, JOHN C
Address 388 GREENWICH ST
City-State-Zip: NEW YORK NY 10013

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 04/07/2017**

Electronic Signature of Signing Officer/Director Detail

Date