

No. C 153032		DUE NO LATER THAN FEB 28, 2009 Annual Report Form		2. Registered Agent and Office NO PO BOX	
Return to: SECRETARY OF STATE 450 NORTH FOURTH STREET PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address - Correct in this box, if applicable CITICORP SECURITIES SERVICES, INC. 6800 CITICORP CENTER DR TAMPA, FL 33616 ANN: TAX AND REPORTING P.O. BOX 30509 TAMPA, FL 33631		CT CORPORATION SYSTEM 1111 W JEFFERSON STE 530 BOISE, ID 83702 USA	
NO FILING FEE IF RECEIVED BY DUE DATE				3. New Registered Agent Signature	
4. Corporations: Enter Names and Business Addresses of President, Secretary and Directors.					
<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>
DIR/PRES	ALAN PACE	390 GREENWICH ST,	NEW YORK, NY		10013
DIR/VP	STEPHEN G. MALEKIAN	390 GREENWICH ST,	NEW YORK, NY		10013
DIR/VP	JON OTTOMANELLI	390 GREENWICH ST,	NEW YORK, NY		10013
	SECRETARY MARIANNA MAFRULLI	390 GREENWICH ST,	NEW YORK, NY		10013
c153032					
5. Organized Under the Laws of: DELAWARE C 153032		6. Signature <u>Lisa A. Hoffman</u> Name <u>Lisa A. Hoffman</u> (Typed or Printed)		Date <u>1-7-09</u> Title <u>Asst. Secretary</u>	

Issued 12/31/2008 by LJM

Do Not Tape or Staple

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Fold, seal and mail this portion.