


**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
03 APR 11 PM 3:19

DOCUMENT # <b>F01000005567</b>	
1. Entity Name <b>UBS Americas Inc.</b>	

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>677 Washington Blvd.</b> Suite, Apt. #, etc.	3. Mailing Address <b>677 Washington Blvd.</b> Suite, Apt. #, etc.
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City & State <b>Stamford, CT</b>	City & State <b>Stamford, CT</b>	4. FEI Number <b>06-1595848</b>	Applied For <input type="checkbox"/> Not Applicable
Zip <b>06901</b>	Country <b>Fairfield</b>	Zip <b>06901</b>	Country <b>Fairfield</b>

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent	
Name <b>Corporation Service Company</b>	
Street Address (P.O. Box Number is Not Acceptable)	
<b>1201 Hays Street</b>	
City <b>Tallahassee</b>	FL Zip Code <b>32301-2525</b>

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**January 1 - May 1 Fee is \$150.00  
After May 1 Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>SEE ATTACHED LIST</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>500015748595 04/11/03--01032--002 **150.00</b>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Jane E. Nutson **Jane E. Nutson, Assistant Secretary 4/8/03**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/02)

**UBS AMERICAS INC.**

**Board of Directors**

**Address**

John P. Costas

677 Washington Blvd.  
Stamford, CT 06901

Joseph J. Grano, Jr.

1285 Avenue of the Americas  
New York, NY 10019

**Officers**

**Address**

John P. Costas  
President,

677 Washington Blvd.  
Stamford, CT 06901

Joseph J. Grano, Jr.  
General Manager

1285 Avenue of the Americas  
New York, NY 10019

Robert C. Dinerstein  
Managing Director and Secretary

299 Park Avenue  
New York, NY 10171

Robert B. Mills  
Managing Director, Treasurer and Chief  
Financial Officer

680 Washington Blvd.  
Stamford, CT 06901

Kenneth D. Levine  
Assistant Treasurer

1000 Harbor Blvd.  
Weehawken, NJ 07087

Jane E. Nutson  
Assistant Secretary

677 Washington Blvd.  
Stamford, CT 06901