FILED
May 27, 2002 8:00 am
Secretary of State
05-27-2002 90395 022 ***150.00

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P34373

1. Entity Name
THE PRUDENTIAL ASSET MANAGEMENT COMPANY, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
PRUDENTIAL PLAZA	213 WASHINGTON ST.
Suite, Apt. #, etc.: 751 BROAD ST.	Suite, Apt. #, etc.: 8TH FL. TAX
City & State: NEWARK, NJ	City & State: NEWARK, NJ
Zip: 07102 Country: US	Zip: 07102 Country: US

DO NOT WRITE IN THIS SPACE

4. FEI Number: 22-2550816 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: THE PRENTICE HALL CORP SYSTEM
Street Address (P.O. Box Number is Not Acceptable): 1201 HAYES STREET STE. 105
City: TALLAHASSEE FL Zip Code: 32301

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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

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

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT PAUL L LOWENSTEIN 751 BROAD STREET NEWARK, NJ 07102
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT JOHN R. STRANGFELD 3 GATEWAY CENTER NEWARK, NJ 07102
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER CHARLES E. CHAPLIN 751 BROAD STREET NEWARK, NJ 07102
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY MAUREEN F. BAKER - fldcowitz 2 GATEWAY CENTER NEWARK, NJ 07102
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASST. COMPTROLLER JANICE F. PAVLOU 213 WASHINGTON NEWARK, NJ 07102
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR KEVIN MYERS 2 GATEWAY CENTER NEWARK, NJ 07102

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CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Janice Pavlou 4/30/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #