

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 07, 2000 8:00 am
Secretary of State

06-07-2000 90007 024 ***150.00

DOCUMENT # 839493

1. Corporation Name

SBHU LIFE AGENCY, INC.

Principal Place of Business

50 WEST ST.
% TAX DEPT.
NEW YORK NY 10013

Mailing Address

250 WEST ST.
TAX DEPT. 9TH FLOOR
NEW YORK NY 10013
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/07/1977

4. FEI Number

13-2896238

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

1 Suite, Apt. #, etc.

2 City & State

3 Zip Country

4 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 New York, NY

29 10040 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPD ☐ DELETE

NAME MARYNOWSKI, STEPHEN T

STREET ADDRESS 388 GREENWICH ST.

CITY-ST-ZIP NEW YORK NY 10013

TITLE PD ☐ DELETE

NAME PANTALEO, LAURA

STREET ADDRESS 388 GREENWICH ST.

CITY-ST-ZIP NEW YORK NY

TITLE T ☐ DELETE

NAME DAY, MICHAEL J.

STREET ADDRESS 388 GREENWICH ST.

CITY-ST-ZIP NEW YORK NY 10013

TITLE AT ☐ DELETE

NAME GROHMAN, LEE

STREET ADDRESS 250 WEST ST.

CITY-ST-ZIP NEW YORK NY

TITLE S ☐ DELETE

NAME SAKS, A. GEORGE

STREET ADDRESS 388 GREENWICH ST.

CITY-ST-ZIP NEW YORK NY 10013

TITLE V ☒ DELETE

NAME MARTIN, LYNNETTE

STREET ADDRESS 388 GREENWICH ST.

CITY-ST-ZIP NEW YORK NY 10013

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

7 World Trade Center
New York, NY 10048

✓
Anne MacIsaac
388 Greenwich St
New York, NY 10013

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lee Grohman 5/1/00
Asst. Treasurer

Daytime Phone #