

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000005777

**Entity Name:** BLACKROCK FINANCIAL MANAGEMENT, INC.

**Current Principal Place of Business:**

50 HUDSON YARDS  
NEW YORK, NY 10001

**FILED**  
**Apr 25, 2023**  
**Secretary of State**  
**8537825118CC**

**Current Mailing Address:**

50 HUDSON YARDS  
NEW YORK, NY 10001 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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            PRES.  
Name            KAPITO, ROBERT  
Address        55 EAST 52ND ST  
City-State-Zip: NEW YORK NY 10022

Title            CEO  
Name            FINK, LAURENCE  
Address        55 EAST 52ND ST  
City-State-Zip: NEW YORK NY 10022

Title            DIRECTOR  
Name            FINK, LAURENCE  
Address        55 EAST 52ND ST  
City-State-Zip: NEW YORK NY 10022

Title            DIRECTOR  
Name            DICKSON, III, R. ANDREW  
Address        40 EAST 52ND ST  
City-State-Zip: NEW YORK NY 10022

Title            SECRETARY  
Name            DICKSON III, R. ANDREW  
Address        40 EAST 52ND ST  
City-State-Zip: NEW YORK NY 10022

Title            TREASURER  
Name            MATSUMOTO, PHILIPPE  
Address        55 EAST 52ND ST  
City-State-Zip: NEW YORK NY 10022

Title            CFO  
Name            SHEDLIN, GARY  
Address        55 EAST 52ND ST  
City-State-Zip: NEW YORK NY 10022

Title            COO  
Name            GOLDSTEIN, ROBERT  
Address        55 EAST 52ND ST  
City-State-Zip: NEW YORK NY 10022

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*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: R.ANDREW DICKSON III**

**SECRETARY**

**04/25/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            SHEDLIN, GARY  
Address        55 EAST 52ND ST  
City-State-Zip: NEW YORK NY 10022