

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005520

Entity Name: SG EQUIPMENT FINANCE USA CORP.

Current Principal Place of Business:

480 WASHINGTON BOULEVARD
JERSEY CITY, NJ 07310-1900

Current Mailing Address:

LUCILE NOEL, C/O SOCIETE GENERALE
245 PARK AVENUE
NEW YORK, NY 10167 US

FEI Number: 56-2647553

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 D, P
Name LAM, DANNY
Address 480 WASHINGTON BOULEVARD
City-State-Zip: JERSEY CITY NJ 07310-1900

Title T
Name SCANNELL, RICHARD
Address 480 WASHINGTON BOULEVARD
City-State-Zip: JERSEY CITY NJ 07310

Title S
Name WOLFE, CORY
Address 245 PARK AVENUE
City-State-Zip: NEW YORK NY 10167

Title DIRECTOR
Name DUCHOLET-REBOLLEDO, MARIE-CHRISTINE
Address 17 COURS VALMY
City-State-Zip: PARIS - LA DEFENSE 92987

Title DIRECTOR
Name JEHMLICH, JOCHEN
Address ROBERT-DAUM-PLATZ 1
City-State-Zip: WUPPERTAL 42117

Title DIRECTOR
Name KAPLAN, MARK
Address 245 PARK AVENUE
City-State-Zip: NEW YORK NY 10167

Title DIRECTOR
Name DALLE-MOLLE, PAUL
Address 245 PARK AVENUE
City-State-Zip: NEW YORK NY 10167

Title CHIEF RISK OFFICER
Name DUNCAN, HENRY
Address 480 WASHINGTON BOULEVARD
City-State-Zip: JERSEY CITY NJ 07310

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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: DANNY LAM

PRESIDENT

04/20/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DEPUTY CHIEF FINANCIAL OFFICER
Name SMITH, MICHAEL
Address 480 WASHINGTON BOULEVARD
City-State-Zip: JERSEY CITY NJ 07310

Title BACK OFFICE MANAGER
Name LATOUCHE, CECILE
Address 480 WASHINGTON BOULEVARD
City-State-Zip: JERSEY CITY NJ 07310

Title DOCUMENTATION MANAGER
Name HENSLEY, PATRICIA
Address 480 WASHINGTON BOULEVARD
City-State-Zip: JERSEY CITY NJ 07310

Title ASSISTANT SECRETARY
Name LUCILE, NOEL
Address 245 PARK AVENUE
City-State-Zip: NEW YORK NY 10167