

**2015 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 BOUILLON, PASCAL  
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 17 COURS VALMY  
City-State-Zip: PARIS - LA DEFENSE 92987

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

*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:** CORY WOLFE

**SECRETARY**

**04/13/2015**

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

\_\_\_\_\_  
Date