FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23 1997 8:00am
Secretary of State

DOCUMENT # 636101 (8)

1. Corporation Name
GENERAL INSTRUMENT REMITTANCE PRODUCTS, INC.

Principal Place of Business	Mailing Address
8770 W BRYN MAWR AVE STE 1300 CHICAGO IL 60631 US	8770 W BRYN MAWR AVE STE 1300 CHICAGO IL 60631-3515 US

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

3. Date Incorporated or Qualified: 09/13/1979
3a. Date of Last Report: 04/22/1996
4. FEI Number: 59-1965370 ☐ 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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FRIEDLAND, RICHARD S.		1.2 NAME		
STREET ADDRESS	8770 W BRYN MANOR AVE, STE 1300		1.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL		1.4 CITY-ST-ZIP		
TITLE	~~VDD~~	☐ DELETE	2.1 TITLE	PRESIDENT, DIRECTOR	☒ Change ☐ Addition
NAME	DUMIT, THOMAS A.		2.2 NAME		
STREET ADDRESS	8770 W BRYN MAWR AVE, STE 1300		2.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL		2.4 CITY-ST-ZIP		
TITLE	VTD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, RICHARD C		3.2 NAME		
STREET ADDRESS	8770 W BRYN MAWR AVE, STE 1300		3.3 STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE	VICE PRESIDENT, DIRECTOR	☐ Change ☒ Addition
NAME			4.2 NAME	CHARLES T. DICKSON	
STREET ADDRESS			4.3 STREET ADDRESS	8770 W. BRYN MAWR AVE - SUITE 1300	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	CHICAGO, IL 60631	
TITLE		☐ DELETE	5.1 TITLE	VICE PRESIDENT, SECRETARY	~~☒~~ Change ☒ Addition
NAME			5.2 NAME	SUSAN M. MEYER	
STREET ADDRESS			5.3 STREET ADDRESS	8770 W. BRYN MAWR AVE - SUITE 1300	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	CHICAGO, IL 60631	
TITLE		☐ DELETE	6.1 TITLE	ASSISTANT SECRETARY	☐ Change ☒ Addition
NAME			6.2 NAME	KEITH A. ZAR	
STREET ADDRESS			6.3 STREET ADDRESS	8770 W. BRYN MAWR AVE - SUITE 1300	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	CHICAGO, IL 60631	

14. I do 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 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, or on an attachment with an address.

SIGNATURE: Richard C. Smith 4/15/97 (773) 695-1000

CR2E034 (9/96)