

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

FILED
May 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 821737 (4)
1. Corporation Name
DEAN WITTER REYNOLDS INC.



Principal Place of Business
C/O CORPORATE TAX DEPT
101 CALIFORNIA ST
SAN FRANCISCO CA 94111

Mailing Address
C/O CORPORATE TAX DEPT
101 CALIFORNIA ST
SAN FRANCISCO CA 94111

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 C/o Morgan Stanley Dean Witter & Co. Suite, Apt. #, etc. 22 1221 Avenue of the Americas 23rd Floor City & State 23 New York, New York 10020 Zip 24 10020 Country 25 USA		2a. Mailing Address 26 Morgan Stanley Dean Witter & Co. Suite, Apt. #, etc. 27 1221 Avenue of the Americas 23rd Floor City & State 28 New York, New York Zip 29 10020 Country 30 USA		3. Date Incorporated or Qualified 08/14/1968	
4. FEI Number 94-1671384		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8. Name and Address of New Registered Agent	
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		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 type of printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V DOUGLAS, RAYMOND F. 429 WELLESLEY AVENUE MILL VALLEY CA	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VT KUMAR, BIRENDRA 58 TATUM DRIVE MIDDLETOWN NJ	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Thomas C. Schneider
STREET ADDRESS		2.3 STREET ADDRESS	64 Howard Road
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Greenwich, CT 06830
TITLE	VD MILLER, STEPHEN R. 29 ATHERTON AVE. ATHERTON CA	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	VSD EDWARDS, CHRISTINE, A 195 POPLAR RD LAKE FOREST IL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	OD PURCELL, PHILIP J 1036 SENECA RD. WILMETTE IL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	PD DEMARTINI, RICHARD 7 NORTHWAY BRONXVILLE NY	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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.

CR2E034 (10/97)