

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

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**May 07 1997 8:00am  
Secretary of State**

**PROFIT CORPORATION  
ANNUAL REPORT  
1997**



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

**DOCUMENT # 850668 (5)**  
1. Corporation Name  
**SALOMON BROTHERS INC.**



Principal Place of Business  
**7 WORLD TRADE CENTER  
TAX DEPT.  
NEW YORK NY 10048  
US**

Mailing Address  
**7 WORLD TRADE CENTER  
TAX DEPT.  
NEW YORK NY 10048-1102  
US**

3. Date Incorporated or Qualified  
**10/12/1981**

3a. Date of Last Report  
**05/01/1996**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number <b>13-3082694</b>	Applied for Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
23 Zip Country	28 Zip Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 25	29 30		

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when transferring) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		<input type="checkbox"/> DELETE
TITLE	<b>CD</b>	
NAME	<b>MAUGHAN, DERYCK C</b>	
STREET ADDRESS	<b>7 WORLD TRADE CENTER</b>	
CITY-ST-ZIP	<b>NEW YORK NY</b>	
TITLE	<b>D</b>	
NAME	<b>DENHAM, ROBERT</b>	
STREET ADDRESS	<b>7 WORLD TRADE CENTER</b>	
CITY-ST-ZIP	<b>NEW YORK NY</b>	
TITLE	<b>S</b>	
NAME	<b>MUNDHEIM, ROBERT</b>	
STREET ADDRESS	<b>7 WORLD TRADE CENTER</b>	
CITY-ST-ZIP	<b>NEW YORK NY</b>	
TITLE	<b>T</b>	
NAME	<b>JASPER, THOMAS W.</b>	
STREET ADDRESS	<b>7 WORLD TRADE CENTER</b>	
CITY-ST-ZIP	<b>NEW YORK NY</b>	
TITLE	<b>AT</b>	
NAME	<b>SMITH, JEFFREY H.</b>	
STREET ADDRESS	<b>7 WORLD TRADE CTR.</b>	
CITY-ST-ZIP	<b>NEW YORK, NY</b>	
TITLE	<b>AS</b>	
NAME	<b>SNOW, ZACHARY</b>	
STREET ADDRESS	<b>7 WORLD TRADE CTR.</b>	
CITY-ST-ZIP	<b>NEW YORK NY</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
1.1 TITLE	<b>CFO</b>		
1.2 NAME	<b>BAILEY, JEROME H</b>		
1.3 STREET ADDRESS	<b>7 WORLD TRADE CENTER</b>		
1.4 CITY-ST-ZIP	<b>NEW YORK, NY 10048</b>		
2.1 TITLE	<b>CAO</b>		
2.2 NAME	<b>MARSHALL, KENNETH K</b>		
2.3 STREET ADDRESS	<b>7 WORLD TRADE CENTER</b>		
2.4 CITY-ST-ZIP	<b>NEW YORK, NY 10048</b>		
3.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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: *Thomas W. Jasper* Thomas W. Jasper

(212) 783-7000

CR2E034 (9/96)