

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 852512

1. Entity Name
CREDIT LYONNAIS SECURITIES (USA) INC.

FILED
Jul 23, 2002 8:00 am
Secretary of State

07-23-2002 90335 034 ***550.00

Principal Place of Business
1301 AVENUE OF THE AMERICAS
37TH FLOOR
NEW YORK NY 10019

Mailing Address
1301 AVENUE OF THE AMERICAS
37TH FLOOR
NEW YORK NY 10019

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State

Zip Country

4. FEI Number 13-2602298

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	COO	<input type="checkbox"/> Delete
NAME	JABLONSKI, RICHARD M	
STREET ADDRESS	14 CRAPE MYRTLE DR	
CITY-ST-ZIP	HOLMDEL NJ 07733	
TITLE	CPD	<input type="checkbox"/> Delete
NAME	PAGES, FRANCOIS A	
STREET ADDRESS	330 E 56TH ST	
CITY-ST-ZIP	NEW YORK NY 10022	
TITLE	CD	<input type="checkbox"/> Delete
NAME	MORIANI, JEAN-MARL	
STREET ADDRESS	330 EAST 56TH STREET	
CITY-ST-ZIP	NEW YORK NY 10022	
TITLE	CFO	<input type="checkbox"/> Delete
NAME	CARRIERI, MICHAEL	
STREET ADDRESS	79 CANNONADE DR	
CITY-ST-ZIP	MARLBORO NJ 07746	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E034 (4/02)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE N. HOWARD III SIGNATURE: RICHARD M. JABLONSKI 7/3/02 412-408-5713
Date Daytime Phone #