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CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 21 AM 9:16

DOCUMENT # 855280 (4)

1. Corporation Name

SOCIETE FRANCAISE DU CHEQUE DE VOYAGE, INC.

Principal Place of Business	Mailing Address
AMERICAN EXPRESS TOWER WORLD FINANCIAL CTR NEW YORK NY 10285-4415 US	AMERICAN EXPRESS TOWER WORLD FINANCIAL CTR NEW YORK NY 10285-4415 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/18/1983
3a. Date of Last Report: 02/21/1994

2. Principal Place of Business
21 200 Vesey Street
Suite, Apt. #, etc. 22
City & State 23
Zip 24 Country 25

2a. Mailing Address
26 200 Vesey Street
Suite, Apt. #, etc. 27
City & State 28
Zip 29 Country 30

4. FEI Number: NOT APPLICABLE ☐ 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
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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, type or printed name of registered agent and date of signature) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE	President	X Change ☐ Addition
NAME	VANNIER, JEAN C	12 NAME	Alain Brifford	
STREET ADDRESS	19 BLVD DES ITALIENS	13 STREET ADDRESS	16 Blvd Des Italiens	
CITY-ST-ZIP	PARIS FR	14 CITY-ST-ZIP	Paris, France 75009	
TITLE	GDO	21 TITLE		X Change ☐ Addition
NAME	BELLE, ALAIN	22 NAME		
STREET ADDRESS	19/29 RUE DU CAPITAINE GUYNEMER	23 STREET ADDRESS		
CITY-ST-ZIP	PARIS FR	24 CITY-ST-ZIP	Paris La Defense, France 92903	
TITLE	O	31 TITLE	Assistant Secretary	X Change ☐ Addition
NAME	SCHEPP, ANNE C	32 NAME		
STREET ADDRESS	276 SUMMIT AVE	33 STREET ADDRESS	200 Vesey Street	
CITY-ST-ZIP	JERSEY CITY NJ	34 CITY-ST-ZIP	New York, NY 10285	
TITLE	L	41 TITLE	Licensing Officer	X Change ☐ Addition
NAME	NORMAN, STEPHEN P.	42 NAME		
STREET ADDRESS	6 HIGHLAND PARK PLACE	43 STREET ADDRESS	200 Vesey Street	
CITY-ST-ZIP	RYE NY	44 CITY-ST-ZIP	New York, NY 10285	
TITLE	D	51 TITLE	Executive Vice President /	X Change ☐ Addition
NAME	BRIFFOD, ALAIN	52 NAME	James Larkin Director	
STREET ADDRESS	3 AVE ST HONORE D'EYLAU	53 STREET ADDRESS	200 Vesey Street	
CITY-ST-ZIP	PARIS, FRANCE	54 CITY-ST-ZIP	New York, NY 10285	
TITLE	D	61 TITLE	Senior Vice President/	X Change ☐ Addition
NAME	BOURSAULT, GEORGES	62 NAME	Marc De Guillebon Director	
STREET ADDRESS	83 BLVD. DES CHENES	63 STREET ADDRESS	103 Champs Elysees	
CITY-ST-ZIP	GUYANCOURT FR	64 CITY-ST-ZIP	Paris, France 75008	

14. I do hereby certify that the information supplied with this report is voluntarily furnished and 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: Anne C. Schepp Anne C. Schepp 2/17/95
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OR OFFICER OR DIRECTOR Date
Assistant Secretary
Title

0404346 FN