


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2004 8:00 am
Secretary of State

05-14-2004 90011 031 ***150.00

DOCUMENT # 856580 1. Entity Name PRUDENTIAL-BACHE PROPERTIES, INC.					
Principal Place of Business ONE SEAPORT PLAZA 199 WATER ST. 28TH FLOOR NEW YORK, NY 10292-0116 US				Mailing Address K. MAGUIRE, LAW DEPT ONE SEAPORT PLAZA 199 WATER ST., 31ST FL NEW YORK, NY 10292-0131 US	
2. Principal Place of Business		3. Mailing Address 213 Washington St			
Suite, Apt. #, etc.		Suite, Apt. #, etc. do Tax Dept			
City & State		City & State Newark NJ			
Zip	Country	Zip 07102	Country ESSEX		
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. 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 <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC MARTIN, BRIAN J. ONE SEAPORT PLAZA NEW YORK, NY 10292 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Charles Chaplin 751 Broad St Newark, NJ 07102 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDCE PISKOROWSKI, CHESTER A. ONE SEAPORT PLAZA NEW YORK, NY 10292 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Kathleen Gibson 751 Broad St Newark, NJ 07102 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCFO WEINREB, STEVEN ONE SEAPORT PLAZA NEW YORK, NY 10292 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President-Tax Robert Szukany 213 Washington St Newark, NJ 07102 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TROIANO, ROBERT JR ONE SEAPORT PLAZA NEW YORK, NY 10292 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TROIANO, ROBERT J ONE SEAPORT PLAZA NEW YORK, NY 10292 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WALDMAN, PAUL ONE SEAPORT PLAZA NEW YORK, NY 10292 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Robert A Szukany Vice Pres - Tax</u> 4/27/04 (973) 802-4246 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					