

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Aug 30, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # 857349**

1. Entity Name  
**J.P. MORGAN CHASE NATIONAL CORPORATE SERVICES, INC.**



Principal Place of Business  
**A CHASE MANHATTAN PLAZA  
 NEW YORK, NY 10081 US**

Mailing Address  
**575 WASHINGTON BLVD.  
 11TH FLOOR  
 JERSEY CITY, NJ 07310 US**



08242004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**13-2781984** Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

**CT CORPORATION SYSTEM  
 1200 S. PINE ISLAND ROAD  
 PLANTATION, FL 33324**

**DO NOT WRITE  
 IN THIS SPACE**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00  
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

000000171275  
 08/30/04-80011-018 550.00

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P KRASS, JAMES 575 WASHINGTON BLVD. JERSEY CITY, NJ 07310
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V BOTH, DAVID G 575 WASHINGTON BLVD. JERSEY CITY, NJ 07310
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SVP METH, JODY E 4 NEW YORK PLAZA FLOOR 15 NEW YORK, NY 10004
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
 IN THIS SPACE**

**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:** \_\_\_\_\_ **8/27/04** **201-595-5761**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #