

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 20, 2003 8:00 am
Secretary of State

08-20-2003 90050 035 ***550.00

0118666 AT

DOCUMENT # F02000002362

1. Entity Name
IDB MORTGAGE CORP.



Principal Place of Business
**511 FIFTH AVENUE
NEW YORK NY 10017**

Mailing Address
**511 FIFTH AVENUE
NEW YORK NY 10017**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **13-4175802**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ISRAEL DISCOUNT BANK OF NEW YORK
2875 N.E. 191ST STREET
AVENTURA FL 33180**

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

FILE NOW!!! FEE IS \$550.00

**After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$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	D GREER, LEONARD 511 FIFTH AVENUE NEW YORK NY 10017	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ITZKOWITZ, THEODORE 511 FIFTH AVENUE NEW YORK NY 10017	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO VOLPE, MICHAEL 511 FIFTH AVENUE NEW YORK NY 10017	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DAVIS, CHET 511 FIFTH AVENUE NEW YORK NY 10017	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CHANG, WEN-CHI 511 FIFTH AVENUE NEW YORK NY 10017	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SNYDER, HARVEY 511 FIFTH AVENUE NEW YORK NY 10017	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant Secretary Wen-Chi Chang 511 Fifth Avenue New York, NY 10017	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Paula Cappello 511 Fifth Avenue, New York, NY 10017	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Senior Executive Vice Pres Edmond Eskenazi 511 Fifth Avenue New York, NY 10017	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President Lissa Baum 511 Fifth Avenue New York, NY 10017	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	First Senior Vice Pres Roger Maglio 511 Fifth Avenue, New York, NY 10017	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Senior VP and Director Herbert Fried 2875 Northeast 191st Street Aventura, FL 33180	<input type="checkbox"/> Change <input checked="" 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/13/03 212-551-8908

Date

Daytime Phone #

CR2E034 (4/03)

Attachment

80139216
FD2000002362

2003 For Profit Corporation Uniform Business Report (UBR)
IDB Mortgage Corp. (cont.)

Title: First Vice President ☐ Change ☒ Addition
Name: Susan Rinaldi
Street Address: 511 Fifth Avenue
City-St-Zip: New York, NY 10017

Title: Vice President ☐ Change ☒ Addition
Name: Joel Eisenberg
Street Address: 511 Fifth Avenue
City-St-Zip: New York, NY 10017

Title: Vice President ☐ Change ☒ Addition
Name: Gary Solomon
Street Address: 511 Fifth Avenue
City-St-Zip: New York, NY 10017

Title: Vice President ☐ Change ☒ Addition
Name: Maureen McKee
Street Address: 511 Fifth Avenue
City-St-Zip: New York, NY 10017

Title: Compliance Officer ☐ Change ☒ Addition
Name: Michael A. Guarino
Street Address: 511 Fifth Avenue
City-St-Zip: New York, NY 10017

Title: Chief Auditor ☐ Change ☒ Addition
Name: Joseph Malyska
Street Address: 511 Fifth Avenue
City-St-Zip: New York, NY 10017

Title: Authorized Signature ☐ Change ☒ Addition
Name: Luis Barredo
Street Address: 511 Fifth Avenue
City-St-Zip: New York, NY 10017

Title: Authorized Signature ☐ Change ☒ Addition
Name: Mary Ann Guss
Street Address: 511 Fifth Avenue
City-St-Zip: New York, NY 10017

Attachment

86139216
F0200002362

Title: Authorized Signature

☐ Change

☒ Addition

Name: Don Roe

Street Address: 511 Fifth Avenue

City-St-Zip: New York, NY 10017