2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003686

Entity Name: OCE FINANCIAL SERVICES, INC.

FILED Jan 06, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

480 WEST 34TH STREET 5600 BROKEN SOUND BLVD NEW YORK, NY 100012320 BOCA RATON, FL 33487-351

Current Mailing Address: New Mailing Address:

100 OAKVIEW DRIVE TAX DEPARTMENT TRUMBULL, CT 06611

FEI Number: 06-1222739 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title:

Name: GINGOLD, MARC O

5600 BROKEN SOUND BLVD. Address: City-St-Zip: BOCA RATON, FL 33487

Title: VΡ

Name: FASANO, STEVE

5600 BROKEN SOUND BLVD. Address: BOCA RATON, FL 33487 City-St-Zip:

Title: AΤ

CACACE, MARIO Name: 100 OAKVIEW DR Address: City-St-Zip: TRUMBULL, CT 06611

Title:

SCARPELLI, JACK J Name: Address: 5450 N. CUMBERLAND AVE. City-St-Zip:

CHICAGO, IL 60656

Title:

CHAPUIS, PATRICK Name: Address: 5450 N CUMBERLAND AVE City-St-Zip: CHICAGO, IL 60656

Title:

VANDONINCK, ERIC Name: Address: 100 OAKVIEW DR. City-St-Zip: TRUMBULL, CT 06611

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARIO CACACE ΑT 01/06/2012