

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F94000001066 (9)

1. Corporation Name

PHILIPS CREDIT CORPORATION



Principal Place of Business

100 E. 42ND ST.
NEW YORK NY 10017-5699

Mailing Address

100 E. 42ND ST.
NEW YORK NY 10017-5699

3. Date Incorporated or Qualified

03/03/1994

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

4. FEI Number

13-3408198

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

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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

Signature, typed or printed name of registered agent and the corporation.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DC	☐ DELETE
NAME	BOOST, E J	
STREET ADDRESS	100 E. 42ND ST.	
CITY-ST-ZIP	NEW YORK NY 10017	
TITLE	PD	☐ DELETE
NAME	CUNDEY, S I JR	
STREET ADDRESS	100 E. 42ND ST.	
CITY-ST-ZIP	NEW YORK NY 10017	
TITLE	VSD	☐ DELETE
NAME	ROZEL, S J	
STREET ADDRESS	100 E. 42ND ST.	
CITY-ST-ZIP	NEW YORK NY 10017	
TITLE	D	☐ DELETE
NAME	TUMMINELLO, S C	
STREET ADDRESS	100 E. 42ND ST.	
CITY-ST-ZIP	NEW YORK NY 10017	
TITLE	VS	☐ DELETE
NAME	WALMAN, B V	
STREET ADDRESS	100 E. 42ND ST.	
CITY-ST-ZIP	NEW YORK NY 10017	
TITLE	V	☐ DELETE
NAME	BUXTON, M	
STREET ADDRESS	100 E. 42ND ST.	
CITY-ST-ZIP	NEW YORK NY 10017	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	DC	☐ Change ☐ Addition
12 NAME	William E. Curran	
13 STREET ADDRESS	100 East 42nd Street	
14 CITY-ST-ZIP	New York, NY 10017	☐ Change ☐ Addition
21 TITLE		☐ Change ☐ Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		☐ Change ☐ Addition
31 TITLE		☐ Change ☐ Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		☐ Change ☐ Addition
41 TITLE		☐ Change ☐ Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		☐ Change ☐ Addition
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		☐ Change ☐ Addition
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 it is changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Paul S. Friedlander

4/17/96

212-850-5192

Day

Daytime Phone

CR2E034 (12/95)