

2002 UNIFORM BUSINESS REPORT (UBR)

05/05/02 AT

DOCUMENT # F95000004369

1. Entity Name
IMPERIAL PREMIUM FUNDING, INC.

FILED

02 MAY -1 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
NORTH PARK TOWN CENTER, BUILDING 600
1200 ABERNATHY ROAD, SUITE 500
ATLANTA GA 30328
US

Mailing Address
160 WATER STREET
18TH FLOOR
NEW YORK NY 10038
US

2. Principal Place of Business

3. Mailing Address
70 Pine Street
30th Floor

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
New York, NY

Zip

Country

Zip
10270

Country

USA

4. FEI Number

58-2196307

Applied For

Not Applicable

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

INSURANCE COMMISSIONER
THE CAPITAL
TALLAHASSEE, FL 32399-0300

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
VITKAUSKAS, GERALD V
160 WATER STREET
NEW YORK NY 10038 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LATZ, RONALD A
70 PINE STREET
NEW YORK NY 10270 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
MCFATE, CAROL A
70 PINE STREET
NEW YORK NY 10270 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
TUCK, ELIZABETH M
70 PINE STREET
NEW YORK NY 10270 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400005418814-5 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
VOGEN, MICHAEL D
160 WATER STREET
NEW YORK NY 10038 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
COB
MATHEWS, EDWARD
70 PINE STREET
NEW YORK NY 10038 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Edward Mathews
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(212) 710-7000

CR2E034 (9/01)



282

ACCOUNT NO. : 072100000032

REFERENCE : 556901 4320171

AUTHORIZATION :

COST LIMIT : \$ 150.00

Patricia Pizot

ORDER DATE : April 30, 2002

ORDER TIME : 1:13 PM

ORDER NO. : 556901-200

CUSTOMER NO: 4320171

CUSTOMER: Ms. Bernadette Colon
American International Group,
70 Pine Street
30th Floor
New York, NY 10270

RECEIVED
02 MAY - 1 PM 3:08
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: IMPERIAL PREMIUM FUNDING, INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janna Wilson-EXT#1155

EXAMINER'S INITIALS: _____