

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 20, 1999 8:00 am  
Secretary of State

04-20-1999 90087 044 \*\*\*150.00

DOCUMENT # F95000004808

1. Corporation Name  
SALOMON REINVESTMENT COMPANY INC.

Principal Place of Business  
7 WORLD TRADE CENTER  
NEW YORK NY 10048

Mailing Address  
7 WORLD TRADE CENTER  
NEW YORK NY 10048

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/05/1995

4. FEI Number

13-3845724

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 owes the current year intangible  
Personal Property Tax.

Yes No

2. Principal Place of Business

21 388 Greenwich Street

Suite, Apt. #, etc.

22

City & State

23 New York, NY

Zip

24 10013

Country

25 USA

2a. Mailing Address

26 388 Greenwich Street

Suite, Apt. #, etc.

27

City & State

28 New York, NY

Zip

29 10013

Country

30 USA

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PDC  
NAME BUSHNELL, DAVID C  
STREET ADDRESS 7 WORLD TRADE CENTER  
CITY-ST-ZIP NEW YORK NY 10048

DELETE

TITLE D  
NAME HOROWITZ, GEDALE B  
STREET ADDRESS 7 WORLD TRADE CENTER  
CITY-ST-ZIP NEW YORK NY

DELETE

TITLE VPCC  
NAME SCRIBNER, RICHARD O  
STREET ADDRESS SEVEN WORLD TRADE CENTER  
CITY-ST-ZIP NEW YORK NY

DELETE

TITLE D  
NAME HOROWITZ, GEDALE B  
STREET ADDRESS 7 WORLD TRADE CENTER  
CITY-ST-ZIP NEW YORK NY 10048

DELETE

TITLE AT  
NAME ROSEN, SAUL M  
STREET ADDRESS 7 WORLD TRADE CENTER  
CITY-ST-ZIP NEW YORK NY

DELETE

TITLE AS  
NAME ALTER, ANDREW W  
STREET ADDRESS 7 WORLD TRADE CENTER  
CITY-ST-ZIP NEW YORK NY

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P  
1.2 NAME Kelly, William  
1.3 STREET ADDRESS 388 Greenwich Street  
1.4 CITY-ST-ZIP New York, NY 10013

Change Addition

2.1 TITLE C  
2.2 NAME Kleinman, Mark  
2.3 STREET ADDRESS 388 Greenwich Street  
2.4 CITY-ST-ZIP New York, NY 10013

Change Addition

3.1 TITLE V  
3.2 NAME Jarrouj, Ajaj  
3.3 STREET ADDRESS 390 Greenwich Street  
3.4 CITY-ST-ZIP New York, NY 10013

Change Addition

4.1 TITLE D  
4.2 NAME Singleton, Matthew  
4.3 STREET ADDRESS 388 Greenwich Stret  
4.4 CITY-ST-ZIP New York, NY 10013

Change Addition

5.1 TITLE D  
5.2 NAME Cook, Patricia  
5.3 STREET ADDRESS 388 Greenwich Street  
5.4 CITY-ST-ZIP New York, NY 10013

Change Addition

6.1 TITLE CFO  
6.2 NAME Milone, Charles  
6.3 STREET ADDRESS 7 World Trade Center  
6.4 CITY-ST-ZIP New York, NY 10048

Change Addition

14. 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Charles Milone

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/99

Date

212-783-0578

Daytime Phone #

CR2E034 (1/98)