

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000004808

1. Entity Name

SALOMON REINVESTMENT COMPANY INC.

FILED
May 26, 2000 8:00 am
Secretary of State

05-26-2000 90093 029 ***150.00

Principal Place of Business

Mailing Address

388 GREENWICH STREET
 NEW YORK NY 10013
 US

388 GREENWICH STREET
 NEW YORK NY 10013-2375
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

7 WORLD TRADE CENTER

28TH FLOOR

NEW YORK NY

10048

NEW YORK



DO NOT WRITE IN THIS SPACE

4. FEI Number

13-3845724

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

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

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, 2000 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 P ☐ Delete
 NAME KELLY, WILLIAM
 STREET ADDRESS 388 GREENWICH STREET
 CITY-ST-ZIP NEW YORK NY 10013

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

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

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

TITLE C ☐ Delete
 NAME KLEINMAN, MARK
 STREET ADDRESS 388 GREENWICH STREET
 CITY-ST-ZIP NEW YORK NY 10013

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

TITLE V ☐ Delete
 NAME JARROUJ, AJAJ
 STREET ADDRESS 390 GREENWICH STREET
 CITY-ST-ZIP NEW YORK NY 10013

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

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

TITLE TREASURER ☒ Change ☐ Addition
 NAME ANZEL, KEITH
 STREET ADDRESS 7 WORLD TRADE CENTER
 CITY-ST-ZIP NEW YORK NY 10048

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/00

Date

Daytime Phone #

CR2E034 (9/99)