

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001091

FILED
Apr 22, 2009
Secretary of State

Entity Name: BESSEMER INVESTOR SERVICES INC

Current Principal Place of Business:

630 5TH AVE
NEW YORK, NY 101110333

New Principal Place of Business:

Current Mailing Address:

630 5TH AVE
NEW YORK, NY 101110333

New Mailing Address:

FEI Number: 51-0270094

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: TSVP () Delete
Name: ARTEMIOU, PETER C
Address: 630 5TH AVE
City-St-Zip: NEW YORK, NY

Title: V () Delete
Name: MARIANI, FRANK
Address: 630 5TH AVE.
City-St-Zip: NEW YORK, NY 101110333

Title: D () Delete
Name: HILTON, JOHN A JR.
Address: 630 5TH AVE.
City-St-Zip: NEW YORK, NY 101110333

Title: P () Delete
Name: FRISCHMAN, PETER
Address: C/O COMPANY, 630 FIFTH AVE.
City-St-Zip: NEW YORK, NY 10111

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MARIANI, FRANK
Address: 630 5TH AVE.
City-St-Zip: NEW YORK, NY 101110333

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PRES (X) Change () Addition
Name: FRISCHMAN, PETER
Address: C/O COMPANY, 630 FIFTH AVE.
City-St-Zip: NEW YORK, NY 10111

Title: D () Change (X) Addition
Name: WILLIAMSON, STEVEN L
Address: C/O COMPANY,, 630 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10111

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PETER C ARTEMIOU

TSVP

04/22/2009

Electronic Signature of Signing Officer or Director

Date