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FILED
Feb 05 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F96000005346 (9)

1. Corporation Name

RODMAN & RENSHAW, INC.

Principal Place of Business

233 S. WACKER DR., #4500
CHICAGO IL 60606

Mailing Address

233 S. WACKER DR., #4500
CHICAGO IL 60606

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/15/1996

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

4. FEI Number

36-2679547

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

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 ~~DELETE~~
NAME SHANAHAN, JOSEPH P
STREET ADDRESS 233 S. WACKER DR., #4500
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE
NAME BORER, JOHN J
STREET ADDRESS 233 S. WACKER DR., #4500
CITY-ST-ZIP CHICAGO IL

TITLE ☐ DELETE
NAME OTT, GILBERT R JR
STREET ADDRESS 233 S. WACKER DR., #4500
CITY-ST-ZIP CHICAGO IL 60606

TITLE ☐ DELETE
NAME PINOU, THOMAS G
STREET ADDRESS 233 S. WACKER DR., #4500
CITY-ST-ZIP CHICAGO IL

TITLE ~~DELETE~~
NAME KIRBY, F. L.
STREET ADDRESS 233 S. WACKER DR., #4500
CITY-ST-ZIP CHICAGO IL

TITLE ~~DELETE~~
NAME ALTMAN, RONALD L
STREET ADDRESS 233 S. WACKER DR., #4500
CITY-ST-ZIP CHICAGO IL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME PD Kirby, F.L.
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME M Karyn R. Webb
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME M Robert Glavor
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the indicated on this annual report or supplemental annual report is true and accurate officer or director of the corporation or the receiver or trustee empowered to execute Block 12 or Block 13 if changed, or on an attachment with an address. I further certify that the information that my signature shall have the same legal effect as if made under oath; that I am an report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

SIGNATURE REQUIRED

CR2E034 (10/97)