

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2001 8:00 am
Secretary of State

09-11-2001 90004 033 ***550.00

DOCUMENT # F98000002914

1. Entity Name
TRAFIGURA AG, INC.

Principal Place of Business

**675 THIRD AVE.
 20TH FLOOR
 NEW YORK NY 10017**

Mailing Address

**675 THIRD AVE.
 20TH FLOOR
 NEW YORK NY 10017**

2. Principal Place of Business

**263 TRESSER BLVD.
 Suite, Apt. #, etc.
 16th Floor**

3. Mailing Address

**263 TRESSER BLVD.
 Suite, Apt. #, etc.
 16th Floor**

City & State

STAMFORD, CT

City & State

STAMFORD, CT

Zip

06901

Country

USA

Zip

06901

Country

USA

4. FEI Number

06-1436098

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current 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

7. Name and Address of New Registered Agent

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CP
 COMETTI, ANTONIO J
 DREILINDENSTRASSE 87
 CH-6006, LUZERN, SWITZERLAND** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**C
 JACQUES DE TURCKHEIM, ERIC C
 24 VINEYARD HILL RD.
 LONDON, SW19, ENGLAND, UK** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**D
 MIGNOLI, REMO
 IM GAMPI 54, CH-6043
 ADLIGENSWIL, SWITZERLAND** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**V
 ROSENFIELD, JOSEPH
 155 WEST 70TH ST.
 NEW YORK NY 10023-4422** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**S
 RODGERS, PETER H
 390 FORELANDS RD.
 ANNAPOLIS MD 21401** ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**C
 COMETTI, ANTONIO J
 DREILINDENSTRASSE 87
 CH-6006 LUZERN, SWITZERLAND** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**P
 ROSENFIELD, Joseph
 155 West 70th Street
 New York, NY 10023-4422** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**V
 BENDER, David
 837 Holmdel Road
 Holmdel, NJ 07733** ☐ Change ☒ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**T.S.
 FROMME, Richard
 58 North Cedar Ad
 Fairfield, CT 06432** ☐ Change ☒ Addition

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

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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/28/01

Date

203-355-7200

Daytime Phone #

CR2E034 (5/01)