

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90056 042 ***150.00

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1. Entity Name
TRAFIGURA AG, INC.



Principal Place of Business
**263 TRESSER BLVD.
16TH FLOOR
STAMFORD, CT 06901**

Mailing Address
**263 TRESSER BLVD.
16TH FLOOR
STAMFORD, CT 06901**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02182004 Chg-P CR2E034 (10/03)

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**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SCHUMACHER, MARCO ☒ Delete
SEESTRASSEE 99A, 6052 HERGISWIL
CH-6006, LUZERN, SWITZERLAND,**

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
ROSENFELD, JOSEPH ☐ Delete
155 WEST 70TH ST.
NEW YORK, NY 100234422**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BENDER, DAVID ☒ Delete
857 HOLMDEL ROAD
HOLMDEL, NJ 07733**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TS
FROMME, RICHARD ☐ Delete
38 NORTH CEDAR RD
FAIRFIELD, CT 06432**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PO
AuseNFelds Joseph ☒ Change ☐ Addition
155 West 70th Street
NEW YORK, NY 10023**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TS
YACURA, MARY ELLEN ☐ Change ☒ Addition
172 Hollow Tree Ridge Road
Darien, CT 06820**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
FROMME, Richard ☒ Change ☐ Addition
38 North Cedar Rd.
Fairfield, CT 06824**

12. 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 10 or Block 11 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

JOSEPH ROSENFELD

2/19/04
Date

203-355-7200
Daytime Phone #