

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 30, 2004 8:00 am**  
**Secretary of State**

07-30-2004 90004 023 \*\*\*558.75



**DOCUMENT # F99000002932**  
 1. Entity Name  
**INVESTEC (US) INCORPORATED**

Principal Place of Business      Mailing Address  
**ONE BATTERY PARK PLAZA**      **ONE BATTERY PARK PLAZA**  
**COMPLIANCE DEPARTMENT**      **COMPLIANCE DEPARTMENT**  
**NEW YORK, NY 10004**      **NEW YORK, NY 10004**

**44050728**



2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
 City & State      City & State  
 Zip      Country      Zip      Country

07262004      Chg-P      CR2E034 (10/03)

4. FEI Number      Applied For  
**13-3732556**      Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**  
**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE, FL 32301-2525**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 8, 2004**

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	DCEO <input type="checkbox"/> Delete MURABITO, JOHN J ONE BATTERY PARK PLAZA NEW YORK, NY 10004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCFO <input type="checkbox"/> Delete PARAGGIO, STEVEN J ONE BATTERY PARK PLAZA NEW YORK, NY 10004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete HERMAN, HUGH 100 GRAYSTON DR SANDOWN, SANDTON, 2196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DCEO <input checked="" type="checkbox"/> Delete SEGALL, MARK ONE BATTERY PARK PLAZA NEW YORK, NY 10004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete RAPPAPORT, DAVID ONE BATTERY PARK PLAZA NEW YORK, NY 10004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete KANTOR, BERNARD 100 GRAYSTON DR., SANDOWN, SANDTON 2196 SOUTH AFRICA,

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition KOSOFF STEPHEN 100 GRAYSTON DR. SANDOWN, SANDTON, SA 2196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition ROSENBLUM, SCOTT C/O KRAMER LEVIN NAFTALIS 419 THIRD AVENUE NEW YORK, NY 10022-3852
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition BURGHARDT-McDONOUGH, RITA ONE BATTERY PARK PLAZA NEW YORK, NY 10004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition THOMAS, PETER P O BOX 2004 Houghton, Johannesburg, SA 2041
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: Gregory Viscovich      Date: 7/26/04      Daytime Phone #: (212) 898-6205