

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 15, 2002 8:00 am
Secretary of State

09-15-2002 90092 036 ***158.75

0110542 AT

DOCUMENT # F99000004426

1. Entity Name

J.P. MORGAN ALTERNATIVE ASSET MANAGEMENT, INC.

Principal Place of Business

1211 AVENUE OF THE AMERICAS
 NEW YORK NY 10036

Mailing Address

1211 AVENUE OF THE AMERICAS
 NEW YORK NY 10036

2. Principal Place of Business

Suite, Apt. #, etc. **42nd FLOOR**

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc. **42nd FLOOR**

City & State

Zip

Country

4. FEI Number **13-3414427**

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

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 13, 2002 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 **V** ☒ Delete
 NAME **SOJKA, SANDRA**
 STREET ADDRESS **3 WOODLAND AVE**
 CITY-ST-ZIP **MATAWAN NJ 07747**

TITLE **C** ☐ Delete
 NAME **O'CONNOR, JOHN M**
 STREET ADDRESS **580 PARK AVENUE A PT 4C**
 CITY-ST-ZIP **NEW YORK NY 10021**

TITLE **V** ☒ Delete
 NAME **SOJKA, SANDRA**
 STREET ADDRESS **43-35 195 STREET**
 CITY-ST-ZIP **FLUSHING NY 11358**

TITLE **VT** ☒ Delete
 NAME **GIORGIO, FRANCIS**
 STREET ADDRESS **19 DONALD DRIVE**
 CITY-ST-ZIP **SYOSSET NY 11791**

TITLE **CD** ☒ Delete
 NAME **RICHARDSON, MARK R**
 STREET ADDRESS **175 EAST 62ND STREET**
 CITY-ST-ZIP **NEW YORK NY 10021**

TITLE **D** ☒ Delete
 NAME **PROSTANO, STEPHEN E**
 STREET ADDRESS **375 OAKLAND SEARCH AVENUE**
 CITY-ST-ZIP **RYE NY 10580**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P/M** ☐ Change ☒ Addition
 NAME **JOEL KATZMAN**
 STREET ADDRESS **3200 Shore Drive**
 CITY-ST-ZIP **Merrick, NY 11566**

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

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

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 NAME
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 CITY-ST-ZIP

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

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

9-12-02

Date

Daytime Phone #

CR2E034 (4/02)



871914

Kate Duffy
Vice President
Compliance

September 11, 2002

#F9900000 4426

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

RE: J. P. Morgan Alternative Asset Management, Inc. ("JPMAAM")

To Whom it May Concern:

Enclosed please find a completed copy of the Uniform Business Report and a check for \$158.75 to satisfy JPMAAM's annual filing fee in the State of Florida.

Please be advised that JPMAAM did not receive the initial filing notice, and is therefore respectfully requesting a waiver of the \$400 late fee, pursuant to the instructions listed in item 8. of the "Frequently Asked Questions" section.

Kindly acknowledge receipt of this filing by signing or stamping the enclosed copy of this letter and returning it in the self-addressed envelope provided.

Please do not hesitate to contact me if you have any questions regarding this filing.

Yours very truly,



Kate Duffy
Vice President
Compliance

September 11, 2002

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

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