2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# M02000002814

Entity Name: UBS SECURITIES LLC

Current Principal Place of Business:

677 WASHINGTON BLVD.
STAMFORD, CT 06901

New Principal Place of Business:

Current Mailing Address:

677 WASHINGTON BLVD.
STAMFORD, CT 06901

New Mailing Address:

FEI Number: 13-3873456 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	COSTAS, JOHN P	
Address:	677 WASHINGTON BLVD.	
City-St-Zip:	STAMFORD, CT 06901	
Title:	MGR	( ) Delete
Name:	DINERSTEIN, ROBERT C	
Address:	299 PARK AVE.	
City-St-Zip:	NEW YORK, NY 10171	
Title:	MGR	( ) Delete
Name:	HUTCHINS, MICHAEL	
Address:	1285 AVENUE OF THE AMERICAS	
City-St-Zip:	NEW YORK, NY 10019	
Title:	MGR	( ) Delete
Name:	JENKINS, HUW	
Address:	677 WASHINGTON BLVD.	
City-St-Zip:	STAMFORD, CT 06901	
Title:	MGR	(X) Delete
Name:	MILLS, ROBERT B	
Address:	677 WASHINGTON BLVD.	
City-St-Zip:	STAMFORD, CT 06901	
Title:	MGR	( ) Delete
Name:	MOELIS, KENNETH	
Address:	1999 AVE. OF THE STARS	
City-St-Zip:	LOS ANGELES, CA 90067	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JANE E. NUTSON, AUTHORIZED REP. REP. 04/29/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date