

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P39610

(1)

1. Corporation Name

RETAIL CREDIT CARD CORPORATION

FILED

97 JUL 31 AM 8:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
% LORD SECURITIES  
TWO WALL STREET  
NEW YORK NY 10005  
US

Mailing Address  
C/O J.L. MACNEIL COOPERS & LYBRAND LLP  
100 PEARL STREET  
HARTFORD CT 06103-4500  
US

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/13/1992

3a. Date of Last Report

02/16/1996

4. FEI Number

13-3670677

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

UNITED CORPORATE SERVICES, INC.  
801 NORTHEAST 167TH STREET  
SUITE 300  
NORTH MIAMI BEACH FL 33162

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PTD  
SORENSEN, PETER H.  
44 DOROTHY DR. RD.  
MORRISTOWN NJ

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AS  
SORENSEN, PETER H.  
44 DOROTHY DR. RD.  
MORRISTOWN NJ

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VSD  
STIDD, ANDREW L.  
7 AVENUE B  
WEST BABYLON NY

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
AT  
STIDD, ANDREW L.  
7 AVENUE B  
WEST BABYLON NY

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VAS  
BRADY, MARY L  
12 WALKER PLACE  
STATEN ISLAND NY

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ATD  
BRADY, MARY L  
12 WALKER PLACE  
STATEN ISLAND NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
VP S AT D  
Richard L. Taiano  
Two Wall Street  
New York, New York 10005

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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\*\*\*\*165.00 \*\*\*\*165.00

Change Addition

Change Addition

Change Addition

Change Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attached report with an address.

SIGNATURE

(860) 241 7000

CR2E034 (9/96)

**Coopers  
& Lybrand**

**Coopers & Lybrand L.L.P.**

a professional services firm

100 Pearl Street  
Hartford, Connecticut  
06103-4508

telephone (860) 241-7000

facsimile (860) 241-7590

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July 21, 1997

**Annual Reports Filings  
Division of Corporations  
Post Office Box 1500  
Tallahassee, FL 32302-1500**

**RE: 1997 Profit Corporation Annual Report  
RETAIL CREDIT CARD CORPORATION  
Document #P39610(1)**

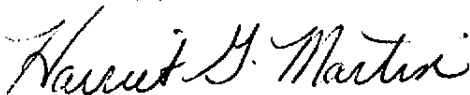
Gentlemen:

Enclosed please find the above-mentioned filing, together with a check in the amount of \$165.00, representing the filing fee.

Per our telephone conversation with you today, inasmuch as we have only received this document for filing within the last two weeks, you have agreed to waive the late-filing fee in connection with this 1997 report. Therefore, we have enclosed our check for \$165.00.

Thank you for your assistance in this matter.

Very truly yours,



Harriet G. Martin

HGM/das  
Enclosures