

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90425 037 ***150.00

DOCUMENT # 819220

1. Entity Name
KIDDER PEABODY & CO., INC.



DO NOT WRITE IN THIS SPACE

70054414

2. Principal Place of Business
800 HARBOR BLVD.
Suite, Apt. #, etc.

3. Mailing Address
800 HARBOR BLVD.
Suite, Apt. #, etc.
TAX DEPT. -1ST FLOOR

DO NOT WRITE IN THIS SPACE

City & State
WEEHAWKEN, NJ

City & State
WEEHAWKEN, NJ

4. FEI Number 13-5650440
Applied For Not Applicable

Zip Country
07086

Zip Country
07086

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

7. Name and Address of Current Registered Agent
Name CORPORATION SERVICE CO.
Street Address (P.O. Box Number is Not Acceptable)
1201 HAYS STREET
City TALLAHASSEE FL Zip Code 32301

**DO NOT WRITE
IN THIS SPACE**

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 _____

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

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	PRESIDENT & DIRECTOR HANNAH BERKOWITZ 800 HARBOR BLVD, WEEHAWKEN, NJ 07086	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE-PRESIDENT JACQUELINE O. LICALZI 800 HARBOR BLVD, WEEHAWKEN, NJ 07086	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASSISTANT TREASURER LOUIS DEVICO 800 HARBOR BLVD, WEEHAWKEN, NJ 07086	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECRETARY GERALDINE L. BANYAI 1285 AVE. OF THE AMER., NY, NY 10019	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR JACQUELINE O. LICALZI 800 HARBOR BLVD, WEEHAWKEN, NJ 07086	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER ROBERT J. CHERSI 800 HARBOR BLVD, WEEHAWKEN, NJ 07086	TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 on an attachment with an address, with all other fee empowered.

SIGNATURE: LOUIS DEVICO 04/22/03 201-352-0559
Date Day/State Phone #

CR2E034B (12/02)

Attachment
UBS PAINWEBBER INC. *70054414*
#81922014

* 800 Harbor Boulevard * Tax Dept-1st Floor * Weehawken, NJ 07086 *

CERTIFIED MAIL #: _____

04/21/2003

DEPT OF STATE
DIV OF CORPS/ANN. RPT FILINGS
P.O. BOX 1500
TALLAHASSEE , FL 32302-1500

Re: Kidder Peabody & Co. Inc.
FEIN: 13-5650440

Gentlemen:

On behalf of the above captioned company, we are enclosing the following return:

ANNUAL REPORT - RETURN

Enclosed also is a check in the amount of \$ 150.00 in payment of the indicated liability.

Should you have any questions regarding this filing please feel free to contact State Tax Manager, Louis DeVico at (201) 352-0559.

Very truly yours,

Nancy Finelli

Nancy Finelli