

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 MAY -1 PM 2:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **823791** (9)
1. Corporation Name:
PAINWEBBER INCORPORATED

Principal Place of Business: **% TAX DEPARTMENT, 9TH FLOOR
1000 HARBOR BLVD
WEEHAWKEN NJ 07087**
Mailing Address: **% TAX DEPARTMENT, 9TH FLOOR
1000 HARBOR BLVD
WEEHAWKEN NJ 07087**

DO NOT WRITE IN THIS SPACE

3. Date incorporated in Country: **12/08/1969** 3a. Date of Last Report: **05/01/1994**
4. FEI Number: **13-2638166** 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**
7. This corporation's responsibility for campaign finance shall be governed by Florida Statutes: Yes No

2. Former Place of Business: 2a. Mailing Address:
21. State: Apt. # etc.: 26. State: Apt. # etc.:
22. City, & State: 27. City, & State:
23. 24. 25. 28. 29. 30.

9. Name and Address of Current Registered Agent: **CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**
10. Name and Address of New Registered Agent:
81. Name:
82. Street Address (P.O. Box Number is Not Acceptable):
83.
84. City: **FL** 85. Zip Code:

11. I, the undersigned, the principal officer, director, officer, and agent of this Florida corporation, hereby certify that the above named corporation has submitted the information for the purpose of changing its registered office or registered agent of office 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 regulations of the Secretary of State, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS:	13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS:
V NAME: DIVICO, LOUIS STREET ADDRESS: 1000 HARBOR BLVD., 9TH FL WEEHAWKEN NJ	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME: DE VICO, LOUIS
D NAME: SCHWARTZ, RONALD STREET ADDRESS: 1000 HARBOR BLVD 9TH FL WEEHAWKEN NJ	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D NAME: GRANO, JOSEPH STREET ADDRESS: 1000 HARBOE BLVD 9TH FL WEEHAWKEN NJ	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D NAME: TREADWAY, JAMES C. STREET ADDRESS: 1000 HARBOR BLVD 9TH FL WEEHAWKEN NJ	<input type="checkbox"/> Change <input type="checkbox"/> Addition
DP NAME: GUENTHER, PAUL B. STREET ADDRESS: 1000 HARBOR BLVD 9TH FL WEEHAWKEN NJ	<input type="checkbox"/> Change <input type="checkbox"/> Addition
S NAME: HAUGHEY, DORTHY G. STREET ADDRESS: 1000 HARBOR BLVD 9TH FL WEEHAWKEN NJ	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and true and correct for the exceptions stated in Sections 199.01(1)(b) Florida Statutes. I further certify that the information indicated on this filing is required by governmental agencies and that my signature shall have the same legal effect as if made under oath. That I am an officer or director of this corporation, as the officer or director empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 1 of the report as required by Section 607.01 Florida Statutes.

SIGNATURE: *Louis De Vico*
PRINTED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR