

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

'95 MAY -1 PM 10: 01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **850668** (5)

1. Corporation Name
SALOMON BROTHERS INC.

Principal Place of Business	Mailing Address
7 WORLD TRADE CENTER TAX DEPT. NEW YORK NY 10048 US	7 WORLD TRADE CENTER TAX DEPT. NEW YORK NY 10048 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 10/12/1981	3a. Date of Last Report 02/03/1994
--	--

4. FEI Number 13-3082694	Applied For Not Applicable
------------------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	--

6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
--	---------------------------------------

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business	2a. Mailing Address
21 <input type="text"/>	26 <input type="text"/>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 <input type="text"/>	27 <input type="text"/>
City & State	City & State
23 <input type="text"/>	28 <input type="text"/>
Zip	Country
24 <input type="text"/>	25 <input type="text"/>
29 <input type="text"/>	30 <input type="text"/>

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of Now Registered Agent

81 Name	<input type="text"/>
82 Street Address (P.O. Box Number is Not Acceptable)	<input type="text"/>
83 <input type="text"/>	<input type="text"/>
84 City	FL 85 Zip Code

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 (not the filer) (applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD
NAME	MAUGHAN, DERYCK C
STREET ADDRESS	7 WORLD TRADE CENTER
CITY - ST - ZIP	NEW YORK NY
TITLE	D
NAME	DENHAM, ROBERT
STREET ADDRESS	7 WORLD TRADE CENTER
CITY - ST - ZIP	NEW YORK NY
TITLE	S
NAME	MUNDHEM, ROBERT
STREET ADDRESS	7 WORLD TRADE CENTER
CITY - ST - ZIP	NEW YORK NY
TITLE	T
NAME	MACFARLANE, JOHN G. III
STREET ADDRESS	7 WORLD TRADE CTR.
CITY - ST - ZIP	NEW YORK NY
TITLE	AT
NAME	SMITH, JEFFREY H.
STREET ADDRESS	7 WORLD TRADE CTR.
CITY - ST - ZIP	NEW YORK, NY
TITLE	AS
NAME	SNOW, ZACHARY
STREET ADDRESS	7 WORLD TRADE CTR.
CITY - ST - ZIP	NEW YORK NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	
4. CITY - ST - ZIP	
21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME	
23. STREET ADDRESS	
24. CITY - ST - ZIP	
31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME	
33. STREET ADDRESS	
34. CITY - ST - ZIP	
41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42. NAME	
43. STREET ADDRESS	
44. CITY - ST - ZIP	
51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52. NAME	
53. STREET ADDRESS	
54. CITY - ST - ZIP	
61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME	
63. STREET ADDRESS	
64. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/95 (212) 783-7000
Date Filed