

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 15, 2003 8:00 am
Secretary of State

07-15-2003 90024 009 ***150.00

0118477 AT

DOCUMENT # 854292

1. Entity Name
ICAHN & CO., INC.



Principal Place of Business
**1 WALL STREET COURT
SUITE 900
NEW YORK NY 10005
US**

Mailing Address
**1 WALL STREET COURT
SUITE 900
NEW YORK NY 10005
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **13-3115882**

Applied For
Not Applicable

Zip Country

Zip Country

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301**

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
After September 10, 2003, Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **ICAHN, CARL CELIAN**
STREET ADDRESS **15 W 53RD STREET**
CITY-ST-ZIP **NEW YORK NY**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Delete
NAME **BUONATO, RICHARD T.**
STREET ADDRESS **419 HAWTHORNE**
CITY-ST-ZIP **STATEN ISLAND NY**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **STD** ☐ Delete
NAME **FREILICH, JOSEPH D.**
STREET ADDRESS **2795 IRONGATE PLACE**
CITY-ST-ZIP **THOUSAND OAKS CA 91362**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard T. Buonato

Richard T. Buonato

7/10/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)

Attachment
90143154
ICAHN & CO., INC. # 854292

Members of the NASD

July 10, 2003

FLORIDA DEPT. OF STATE

To Whom It May Concern:

Enclosed is a check for \$150.00 for our filing fee. We did not receive the first notice, therefore I am requesting that the late fee be waived.

Thank you for your cooperation.

Very truly yours,

Richard T. Buonato

Richard T. Buonato
Vice-President/Controller