

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 436450

Entity Name: BAC FLORIDA BANK

FILED
Apr 19, 2007
Secretary of State

Current Principal Place of Business:

169 MIRACLE MILE
R-10
MIAMI, FL 33134 US

New Principal Place of Business:

Current Mailing Address:

169 MIRACLE MILE
R-10
MIAMI, FL 33134 US

New Mailing Address:

FEI Number: 59-1485307 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DIAZ, RUBEN
4361 MAYFAIR DRIVE
MIAMI, FL 33133 US

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.

SIGNATURE: RUBEN DIAZ

04/19/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: CRUZ, ERNESTO DR
Address: 251 CRANDON BLVD APT. 307
City-St-Zip: KEY BISCAWAYNE, FL 33149

Title: SD () Delete
Name: PETREY, RODERICK N
Address: 508 CASTANIA AVENUE
City-St-Zip: CORAL GABLES, FL 33146

Title: CD () Delete
Name: PELLAS, CARLOS F CH.
Address: 169 MIRACLE MILE, R-10
City-St-Zip: CORAL GABLES, FL 33134 OC

Title: PD () Delete
Name: ROBLETO, FRANK D
Address: 13135 S.W. 81 COURT
City-St-Zip: MIAMI, FL 33157 OC

Title: D (X) Delete
Name: CONWAY, PETER
Address: 2449 SOUTH BAYSHORE DR.
City-St-Zip: MIAMI, FL 33133

Title: CC () Delete
Name: PELLAS, ALFREDO F JR
Address: 8245 LOS PINOS CIR
City-St-Zip: CORAL GABLES, FL 33146

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIO MARTINEZ

CFO

04/19/2007

Electronic Signature of Signing Officer or Director

Date