2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G08091

Entity Name: OCEAN BANK

Current Principal Place of Business:

780 NW 42ND AVE SUITE 300 MIAMI, FL 33126

Current Mailing Address:

780 NW 42ND AVE SUITE 300 MIAMI, FL 33126 US

FEI Number: 59-2237280

Name and Address of Current Registered Agent:

NICHOLAS, LOUIS KESQ. 780 NW 42ND AVE SUITE 500 MIAMI, FL 33126 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:

Electronic Signature of Registered Agent

Officer/Director Detail ·

Officer/Director Detail :				
Title	CHAIRMAN, PRESIDENT	Title	DIRECTOR, EXECUTIVE VICE PRESIDENT	
Name	MACEDO, A. ALFONSO	Name	CURRY, TERRY J	
Address	780 NW 42ND AVE SUITE 601	Address	780 NW 42ND AVE SUITE 601	
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126	
Title	D	Title	D	
Name	MACEDO RODRIGUEZ, JAVIER	Name	– DE ABREU GONZALEZ, ERNESTO J	
Address	780 NW 42ND AVE SUITE 601	Address	780 NW 42ND SUITE 601	
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126	
Title	D	Titlo	П	
Title Name	D GONZALEZ, ANTONIO A	Title Name	D FERNANDEZ ANTONIO	
	-	Name	FERNANDEZ, ANTONIO	
Name	GONZALEZ, ANTONIO A			
Name Address	GONZALEZ, ANTONIO A 780 NW 42ND AVE SUITE 601	Name Address	FERNANDEZ, ANTONIO 780 NW 42ND AVE SUITE 601	
Name Address City-State-Zip:	GONZALEZ, ANTONIO A 780 NW 42ND AVE SUITE 601 MIAMI FL 33126	Name Address City-State-Zip:	FERNANDEZ, ANTONIO 780 NW 42ND AVE SUITE 601 MIAMI FL 33126 D	
Name Address City-State-Zip: Title	GONZALEZ, ANTONIO A 780 NW 42ND AVE SUITE 601 MIAMI FL 33126 D	Name Address City-State-Zip: Title	FERNANDEZ, ANTONIO 780 NW 42ND AVE SUITE 601 MIAMI FL 33126 D DEL BUSTO, JUAN 780 NW 42ND AVE	
Name Address City-State-Zip: Title Name	GONZALEZ, ANTONIO A 780 NW 42ND AVE SUITE 601 MIAMI FL 33126 D GONZALEZ, RICARDO 780 NW 42ND AVE	Name Address City-State-Zip: Title Name	FERNANDEZ, ANTONIO 780 NW 42ND AVE SUITE 601 MIAMI FL 33126 D DEL BUSTO, JUAN 780 NW 42ND AVE SUITE 601	

I hereby 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 all other like empowered.

SIGNATURE: A. ALFONSO MACEDO

04/27/2017 CHAIRMAN, PRESIDENT

Electronic Signature of Signing Officer/Director Detail

FILED Apr 27, 2017 Secretary of State CC2441668279

Certificate of Status Desired: No

Date

Date