## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J18236

**Entity Name: BANCO DO BRASIL AMERICAS** 

**Current Principal Place of Business:** 

2 SOUTH BISCAYNE BOULEVARD SUITE 3870 MIAMI, FL 33131

## **Current Mailing Address:**

2 SOUTH BISCAYNE BOULEVARD SUITE 3870 MIAMI, FL 33131 US

FEI Number: 59-2680958 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WHYTE, LEONARD R 2 SOUTH BISCAYNE BOULEVARD SUITE 3870 MIAMI, FL 33131 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:

Title PCEO Title VPS

Name SEGURA, ANTONIO CASSIO Name WHYTE, LEONARD R

Address 2 SOUTH BISCAYNE BOULEVARD Address 2 SOUTH BISCAYNE BOULEVARD

SUITE 3870 SUITE 3870

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title DCH Title D

Name PROLA SALINAS, JOSE LUIS Name DE VRIES ASHLEY, DIANE

Address 2 SOUTH BISCAYNE BOULEVARD Address 2 SOUTH BISCAYNE BOULEVARD

SUITE 3870 SUITE 3870

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title D Title D

Name CROWELL, CHARLES WAYNE Name ROUSSAKIS, EMMANUEL N

Address 2 SOUTH BISCAYNE BOULEVARD Address 2 SOUTH BISCAYNE BOULEVARD

SUITE 3870 SUITE 3870

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

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: LEONARD R. WHYTE

VICE PRESIDENT

03/04/2015

Date

FILED Mar 04, 2015

**Secretary of State** 

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