

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P02000076271

**Entity Name:** BRADESCO GLOBAL ADVISORS INC.**Current Principal Place of Business:**3011 PONCE DE LEON BOULEVARD  
PH1  
CORAL GABLES, FL 33134**Current Mailing Address:**3011 PONCE DE LEON BOULEVARD  
PH2  
CORAL GABLES, FL 33134 US**FEI Number:** 11-3655905**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PANNELLA, ANNA MARIA  
3011 PONCE DE LEON BOULEVARD  
PH2  
CORAL GABLES, FL 33134 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:** ANNA MARIA PANNELLA

04/26/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title      PRESIDENT & CEO, DIRECTOR  
Name      LANFRANCHI, RICARDO  
Address    3011 PONCE DE LEON BOULEVARD  
            PH1  
City-State-Zip: CORAL GABLES FL 33134

Title      DIRECTOR  
Name      ROJAS, JULIO  
Address    3011 PONCE DE LEON BOULEVARD  
            PH1  
City-State-Zip: CORAL GABLES FL 33134

Title      DIRECTOR, SECRETARY  
Name      GONZALEZ-STAWINSKI , CARLOS  
Address    3011 PONCE DE LEON BOULEVARD  
            PH1  
City-State-Zip: CORAL GABLES FL 33134

Title      DIRECTOR  
Name      HERNANDEZ, DAVID  
Address    3011 PONCE DE LEON BOULEVARD  
            PH1  
City-State-Zip: CORAL GABLES FL 33134

Title      DIRECTOR  
Name      PETREY, RODERICK  
Address    3011 PONCE DE LEON BOULEVARD  
            PH1  
City-State-Zip: CORAL GABLES FL 33134

Title      CHAIRMAN  
Name      SCARPELLI, CASSIANO  
Address    3011 PONCE DE LEON BOULEVARD  
            PH1  
City-State-Zip: CORAL GABLES FL 33134

Title      DIRECTOR  
Name      LIMA, HENRIQUE LEME PINTO  
Address    3011 PONCE DE LEON BOULEVARD  
            PH1  
City-State-Zip: CORAL GABLES FL 33134

Title      DIRECTOR  
Name      LEAL, GUILHERME M  
Address    3011 PONCE DE LEON BOULEVARD  
            PH1  
City-State-Zip: CORAL GABLES FL 33134

**Continues on page 2**

*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:** RICARDO LANFRANCHI

PRESIDENT &amp; CEO

04/26/2023

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	COSCARELLI, MARCELO
Address	3011 PONCE DE LEON BOULEVARD PH1
City-State-Zip:	CORAL GABLES FL 33134