

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007741

Entity Name: DB PRIVATE WEALTH MORTGAGE LTD. INC

Current Principal Place of Business:

60 WALL STREET
NEW YORK, NY 10005

FILED
Apr 28, 2017
Secretary of State
CC9959002659

Current Mailing Address:

1011 CENTRE ROAD
SUITE 200
WILMINGTON, DE 19805 US

FEI Number: 20-5728606

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Date

Officer/Director Detail :

Title D
Name GREENE, WILLIAM
Address 60 WALL STREET NEW YORK, NY 100
City-State-Zip: NEW YORK NY 10005

Title D
Name HAIGH, NICHOLAS
Address 345 PARK AVENUE NEW YORK, NY 10
City-State-Zip: NEW YORK NY 10154

Title D
Name HART, KIMBERLY
Address 60 WALL STREET NEW YORK, NY 100
City-State-Zip: NEW YORK NY 10005

Title D
Name HOFFARTH, CHARLES
Address 60 WALL STREET NEW YORK, NY 100
City-State-Zip: NEW YORK NY 10005

Title D
Name MCAVOY, DAN
Address 345 PARK AVENUE NEW YORK, NY 10
City-State-Zip: NEW YORK NY 10154

Title MANAGING DIRECTOR
Name CLARKE, THOMAS
Address 345 PARK AVENUE NEW YORK, NY 10
City-State-Zip: NEW YORK NY 10154

Title MANAGING DIRECTOR
Name FERARRA, PETER
Address 60 WALL STREET NEW YORK, NY 100
City-State-Zip: NEW YORK NY 10005

Title V
Name HARPER, ROBERT
Address 60 WALL STREET NEW YORK, NY 100
City-State-Zip: NEW YORK NY 10005

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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: ANGELINE L. PATRICK

SECRETARY

04/28/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title D
Name MEDINA, SARITA
Address 60 WALL STREET NEW YORK, NY 100
City-State-Zip: NEW YORK NY 10005

Title S
Name PATRICK, ANGELINE L
Address 1011 CENTRE ROAD
SUITE 200
City-State-Zip: WILMINGTON DE 19805