

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE
 Sandra B. Morham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

1995 AUG -1 AM 9:18

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # 840396 (6)
 1. Corporation Name
LLOYDS BANK PLC (ENGLAND)

Principal Place of Business Mailing Address
ATTN: LEGAL DEPT., 199 WATER ST. P. O. BOX 2008 NEW YORK NY 10038

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21		26		04/06/1978	06/10/1994
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number	Applied For
23 City & State		28 City & State		13-2693385	Not Applicable
24 Zip		29 Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required
25		30		<input type="checkbox"/>	\$5.00 May Be Added to Fees
9. Name and Address of Current Registered Agent				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
KELLOUGH, PATRICIA 1 BISCAYNE TOWER SUITE 3200 MIAMI FL 33131				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
KELLOUGH, PATRICIA 1 BISCAYNE TOWER SUITE 3200 MIAMI FL 33131				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Signature filed by printed name of registered agent and his or her address) (NOTE: Registered Agent signature required when resubmitting)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	IBBS, SIR R	1 2 NAME	
STREET ADDRESS	71 LOMBARD STREET	1 3 STREET ADDRESS	
CITY - ST - ZIP	LONDON EC3P 3BS	1 4 CITY - ST - ZIP	
TITLE	D	2 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, MR. P G.	2 2 NAME	
STREET ADDRESS	71 LOMBARD STREET	2 3 STREET ADDRESS	
CITY - ST - ZIP	LONDON EC3P 3BS	2 4 CITY - ST - ZIP	
TITLE	D	3 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVES, MR. J T.	3 2 NAME	
STREET ADDRESS	71 LOMBARD STREET	3 3 STREET ADDRESS	
CITY - ST - ZIP	LONDON EC3P 3BS	3 4 CITY - ST - ZIP	
TITLE	D	4 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PITMAN, SIR BRIAN,	4 2 NAME	
STREET ADDRESS	71 LOMBARD STREET	4 3 STREET ADDRESS	
CITY - ST - ZIP	LONDON EC3P 3BS	4 4 CITY - ST - ZIP	
TITLE	D	5 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREENBURY, SIR R	5 2 NAME	
STREET ADDRESS	71 LOMBARD STREET	5 3 STREET ADDRESS	
CITY - ST - ZIP	LONDON EC3P 3BS	5 4 CITY - ST - ZIP	
TITLE	O	6 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCKENDRY, MR. K P.	6 2 NAME	
STREET ADDRESS	199 WATER ST	6 3 STREET ADDRESS	
CITY - ST - ZIP	NNEW YORK NY	6 4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *Kevin P. McKendry* Kevin P. McKendry 7/25/95 (212) 607-4501
(Signature typed on printed name of signing officer or director)

CR2E034 (3/95)

840396

LLOYDS BANK PLC
LIST OF DIRECTORS

ATTACHMENT TO: FLORIDA DEPARTMENT OF STATE
LLOYDS BANK PLC'S ANNUAL REPORT - 1995

Address For All Directors:

LLOYDS BANK PLC
Secretary's Department
71 Lombard Street
London EC3P 3BS
ENGLAND

Directors:

Sir Simon Hornby
Sir Robin Ibbs
Sir Brian Pitman
Sir Michael Quinlan
Sir Richard Greenbury
Eric Swainson
The Earl of Selborne
P.G. Brown
I.M.G. Prosser
S.A. Maran
J.T. Davies
A.E. Moore
D.B. Pirrie
J.M. Raisman
P.C. Nicholson
C.R. Smith
Dr. Ogilvie

DIRS.