2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2007 8:00 am
Secretary of State
03-22-2007 90014 019 ***158.75

DOCUMENT # 840396

1. Entity Name
LLOYDS TSB BANK PLC

Principal Place of Business	Mailing Address
25 GRESHAM STREET LONDON EC2V 7HN,	2 S. BISCAYNE BLVD. SUITE 3200 MIAMI, FL 33131

03092007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 13-3321516 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ESTIMA, CARLOS
ONE BISCAYNE TOWER
SUITE 3200
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VAN DEN BERGH, MAARTEN 25 GRESHAM STREET LONDON, ec2v 7hn	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Victor Blank 25 Gresham Street London ec2v 7hn	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PRITCHARD, DAVID 25 GRESHAM STREET LONDON, ec2v 7 hn	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Antonio Cruz One Biscayne Tower, Suite 3200 Miami, FL 33131	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DO DANIELS, ERIC 25 GRESHAM STREET LONDON, ec2v 7hn	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DO WEIR, HELEN 25 GRESHAM STREET LONDON EC2V 7HN,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ESTIMA, CARLOS ONE BISCAYNE TOWER, SUITE 3200 MIAMI, FL 33131	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	O MCKENDRY, KEVIN P ESQ. 1251 AVE OF THE AMERICAS (39TH FLOOR) NEW YORK, NY 10020	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 3/19/07 (305)579 8942
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #