

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **849398** (3)

1. Corporation Name

**DEUTSCH-SUDAMERIKANISCHE BANK AKTIENGESELLSCHAFT  
, INC.**



Principal Place of Business

**801 BRICKELL AVE.  
MIAMI FL 33131**

Mailing Address

**801 BRICKELL AVE.  
MIAMI FL 33131**

3. Date Incorporated or Qualified <b>06/11/1981</b>	3a. Date of Last Report <b>02/09/1995</b>
4. FEI Number <b>59-2108559</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Country	30. Country

9. Name and Address of Current Registered Agent

**DAVIS, EDWARD H JR.  
STEEL HECTOR & DAVIS  
200 S. BISCAYNE BLVD.  
MIAMI FL FL 33131**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. City
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

Signature, typed or printed name of registered agent and initial applicant

(NOTE: Registered Agent's signature required when changing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	<b>RADECKE, ALBRECHT C</b>	
STREET ADDRESS	<b>D-2000 HAMBURG 36</b>	
CITY- ST- ZIP	<b>GERMANY</b>	
TITLE	D	<input type="checkbox"/> DELETE
NAME	<b>ZIMMERLING, KURT</b>	
STREET ADDRESS	<b>D-2000 HAMBURG 36</b>	
CITY- ST- ZIP	<b>GERMANY</b>	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	<b>VOSWINCKEL, RICHARD</b>	
STREET ADDRESS	<b>801 BRICKELL AVENUE</b>	
CITY- ST- ZIP	<b>MIAMI FL</b>	
TITLE	D	<input type="checkbox"/> DELETE
NAME	<b>GUBITZ, UDO H.</b>	
STREET ADDRESS	<b>D-2000 HAMBURG 36</b>	
CITY- ST- ZIP	<b>GERMANY</b>	
TITLE	D	<input type="checkbox"/> DELETE
NAME	<b>FROHLICH, HELMUT</b>	
STREET ADDRESS	<b>D-2000 HAMBURG 36</b>	
CITY- ST- ZIP	<b>GERMANY</b>	
TITLE	V	<input type="checkbox"/> DELETE
NAME	<b>JOCKEL, HELMUT</b>	
STREET ADDRESS	<b>801 BRICKELL AVE</b>	
CITY- ST- ZIP	<b>MIAMI FL</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	M	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY- ST- ZIP		
2.1 TITLE	M	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY- ST- ZIP		
3.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	<b>BOTHE, MICHAEL</b>	
3.3 STREET ADDRESS	<b>801 BRICKELL AVENUE</b>	
3.4 CITY- ST- ZIP	<b>MIAMI FL 33131</b>	
4.1 TITLE	M	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY- ST- ZIP		
5.1 TITLE	M	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY- ST- ZIP		
6.1 TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	<b>JOCKEL, HELMUT</b>	
6.3 STREET ADDRESS		
6.4 CITY- ST- ZIP		

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**HELMUT JOCKEL**

1/29/96

(305) 373-0000

CR2E034 (12/95)