2006 FOR PROFIT CORPORATION REINSTATEMENT

KEINOTATEMENT										
DOCUMENT # 849398 1. Entity Name DRESDNER BANK LATEINAMERIKA					The same shows					
AKTIENGESELLSCHAFT						SMAR-6				
Principal Place of Business Mailing Address					SF	CRETARY	OF STATE			
801 BRICKELL AVE.		801 BRICKELL AVE.			. TAL	LAHASSEE	, FLORID	AAA	- A/	
SUITE 700		SUITE 700		1	المنطقية المناطقة		い。ことに	US	-06	
MIAMI, FL 33131-4945		MIAMI, FL 33131-4945								
2. Principal Place of Business		3. Mailing Address			(L)					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02272006	REIN-P	CR2E098	·	·	
City & State		City & State			4. FEI Numbe 59-210			<u> </u>	Applicable	
Zip	Country	Zip	Country		ļ	of Status Desired	Fe	8.75 Addi e Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
000000	TION COMPANY OF MIAM		Name	Name						
CORPORATION COMPANY OF MIAMI 201 S. BISCAYNE BLVD. STE. 1600 (BB)			Street	Street Address (P.O. Box Number is Not Acceptable)						
MIAMI, FL 33131										
			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. CORPORATION COMPANY OF MIANN SIGNATURE STATEMENT OF										
FILE NOW!!! FEE IS \$900.00										
10.	OFFICERS AND D	IRECTORS	11.		ADDITIONS	CHANGES TO OF	FICERS AND D	RECTORS	IN 11	
TITLE	М	Delete	TITLE	P			[Change	x St Addition	
NAME	HERRMANN, HORST MR	,,	NAME	Wei	chbrodt	, Joaqu	im Mr.			
STREET ADDRESS	NEUER JUNGFERNSTIEG 16		STREET ADDRESS			fernsti				
CITY-ST-ZIP	HAMBURG GERMANY, HH D-200		CITY-ST-ZIP	Ham	burg, (Germany :				
TITLE	M	Delete	TITLE	1			Ε	Change	☐ Addition	
NAME	VOSWINCKEL, RICHARD MR		NAME		ı,) -1 (***)			
STREET ADDRESS CITY-ST-ZIP	NEUER JUNGFERNSTIEG 16 HAMBURG GERMANY, HH D-200	1	STREET ADDRESS CITY-ST-ZIP		12 11373	100065 20/060103) I UIDIC 01000	%-≈•€! - **908	. 75	
	V			1	007 £	.010 00 010		<u>****.⊐U.G</u> ☐ Change	Addition	
TITLE NAME	SPANG, THOMAS	Delete	TITLE NAME			•	t	clialige	☐ WOOTHON	
STREET ADDRESS	801 BRICKELL AVE		STREET ADDRESS							
CITY-ST-ZIP	MIAMI, FL 33131		CITY-ST-ZIP							
TITLE	М	☐ Delete	TITLE	1				Change	Addition	
NAME	DAMBMANN, WOLFGANG MR		NAME							
STREET ADDRESS	NEUER JUNGFERNSTIEG 16		STREET ADDRESS	. [
CITY-ST-ZIP	HAMBURG GERMANY, HH D-200)	CITY-ST-ZIP	<u> </u>						
TITLE	V	Delete	TITLE	1			[Change	☐ Addition	
NAME	WOLF, CARL MR		NAME	.						
STREET ADDRESS	801 BRICKELL AVE		STREET ADDRESS CITY-ST-ZIP	'						
CITY-ST-ZIP	MIAMI, FL 33131	57 ~		 				☐ Change	Addition	
TITLE NAME	M BLUM, HM	Delete	TITLE NAME				L	T cusude	L. AUGIOUI	
STREET ADDRESS	NEUER JUNGFERNSTIEG 16		STREET ADDRESS	.					-	
CITY-ST-ZIP	HAMBURG GERMANY, HH D-20)	CITY-ST-ZIP							
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 of the cor	12. I hereby certify that the information supplied with this filling 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 it made under oath; that I am an officer or director of the correction or the received or tustee empowered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in Block 10 or Block 11 if									

Joaquim Weichbrodt 011.4.9.172.422.5049