

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2007 8:00 am
Secretary of State

04-20-2007 90203 036 ***150.00

DOCUMENT # 854436

1. Entity Name
AMERICAN EXPRESS BANK LTD.



Principal Place of Business
**200 VESEY STREET
WFC-3 SECRETARYS OFFICE
NEW YORK, NY 10285 US**

Mailing Address
**200 VESEY STREET
WFC-3 TAX DEPT
NEW YORK, NY 10285-3002 US**

200001000



04122007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-4922260

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PCEO
HOLMES, RICHARD W
200 VESEY STREET
NEW YORK, NY 10285**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
NORMAN, STEPHEN
200 VESEY STREET
NEW YORK, NY 10285**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**GC
KOURIDES, NICHOLAS
200 VERSEY STREET
NEW YORK, NY 10285**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
HOUGH, PAUL H
200 VERSEY STREET
NEW YORK, NY 10285**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephen P. Norman

Date

4/13/07

Daytime Phone #

212-640-2918