

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # F02000005630

1. Entity Name  
RBC CAPITAL MARKETS ARBITRAGE, S.A.  
CORPORATION



FILED

06 APR 21 PM 1:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
ONE LIBERTY PLAZA, 165 BROADWAY  
NEW YORK, NY 10006

Mailing Address  
ONE LIBERTY PLAZA, 165 BROADWAY  
NEW YORK, NY 10006

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
48-0358048

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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 \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME D BURBIDGE, JOHN ☒ Delete  
STREET ADDRESS ONE LIBERTY PLAZA, 165 BROADWAY  
CITY-ST-ZIP NEW YORK, NY 10006

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME P STANDISH, MARK ☒ Delete  
STREET ADDRESS ONE LIBERTY PLAZA, 165 BROADWAY  
CITY-ST-ZIP NEW YORK, NY 10006

TITLE  
NAME P Richard TAVOSO ☐ Change ☒ Addition  
STREET ADDRESS One Liberty Plaza, 165 Broadway  
CITY-ST-ZIP New York, NY 10006

TITLE  
NAME T RUNCIMAN, BRUCE ☐ Delete  
STREET ADDRESS ONE LIBERTY PLAZA, 165 BROADWAY  
CITY-ST-ZIP NEW YORK, NY 10006

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME COO GOTTLIEB, PAUL ☐ Delete  
STREET ADDRESS ONE LIBERTY PLAZA, 165 BROADWAY  
CITY-ST-ZIP NEW YORK, NY 10006

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME CCO HARE-BEY, DWAYNE ☐ Delete  
STREET ADDRESS ONE LIBERTY PLAZA, 165 BROADWAY  
CITY-ST-ZIP NEW YORK, NY 10006

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME D TAVOSO, RICHARD ☒ Delete  
STREET ADDRESS ONE LIBERTY PLAZA, 165 BROADWAY  
CITY-ST-ZIP NEW YORK, NY 10006

TITLE  
NAME ☐ Change ☐ Addition  
STREET ADDRESS  
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 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

K. Eckel APR 24 2006

Date

Daytime Phone #

Paul M. Gottlieb, COO

212-858-7444

REINSTATEMENT

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