## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # F02000005630					FILEU			
1. Entity Name RBC CAPITAL MARKETS ARBITRAGE, S.A. CORPORATION					Y-1 PM 2:			
Principal Plac	e of Business	Mailing Address	Mailing Address		HASSEE, FLOR	Adis		
ONE LIBERTY PLAZA, 165 BROADWAY NEW YORK, NY 10006 ONE LIBERTY PLAZA, 165 NEW YORK, NY 10006			55 Broadway	TALLA	HASSEE' I CO.			
	Place of Business - No P.O. Box #	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			08 Chg-P	CR2E034 (12/0	06)	
City & State		City & State		<b>I</b>	4. FEI Number Applied For 48-0358048 Not Applicable			
Zip	Country	Zip Co		5. Certifi	5. Certificate of Status Desired		Additional quired	
	6. Name and Address of Current	Registered Agent		7. Name	and Address of New I	Registered Agent		
C T CORPORATION SYSTEM				Name				
1200 SOU	TH PINE ISLAND ROAD ION, FL 33324		Street A	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								
	and the second s			·				
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.0	9. Election Campaig Trust Fund Contril		\$5.00 May B Added to Fees	e			
10.	OFFICERS AND	··········	11.		NS/CHANGES TO OF	FICERS AND DIRECT	FORS IN 11	
TITLE NAME	CP Delete TANOSO, RICHARD			CEO and President X Change Addition				
STREET ADDRESS				TADDRESS RICHard Tavoso				
CITY-ST-ZIP	NEW YORK, NY 10006							
TITLE NAME				700129481657 Addition   ADDRESS 05/14/0801041018 **158.75				
STREET ADDRESS								
CITY-ST-ZIP	NEW YORK, NY 10006	CITY-ST-ZiP						
TITLE NAME	CCO HARE-BEY, DEWAYNE	☐ Delete	TITLE NAME	CCO	<b>.</b>	⊠ Char	nge 🗌 Addition	
STREET ADDRESS	SS 1 LIBERTY PLAZA 165 BROADWAY STR			DWAYNE Hare-Bey				
CITY-ST-ZIP	NEW YORK, NY 10006		CITY-ST-ZIP	1 Liberty I	Plaza, 165 Bro			
TITLE NAME	HT MCBRIDE, EDWARD	Defete	TITLE NAME			☐ Char	nge	
STREET ADDRESS	1 LIBERTY PLAZA ,165 BROAD\	WAY	STREET ADDRESS					
CITY-ST-ZIP	NEW YORK, NY 10006		CITY-ST-ZIP					
TITLE NAME	AS LEVEY, LISA	☐ Delete	TITLE NAME			☐ Char	nge	
STREET ADDRESS	RESS 1 LIBERTY PLAZA ,165 BROADWAY							
CITY-ST-ZIP	NEW YORK, NY 10006	Delete	CITY-ST-ZIP	CFO			nos 🖾 Additios	
NAME	RUNCIMAN, BRUCE	LI Delete	TITLE NAME		33	☐ Clia	nge 🗵 Addition	
STREET ADDRESS 1 LIBERTY PLAZA ,165 BROADWAY STR			STREET ADDRESS	Earnest Chandler  1 Liberty Plaza, 165 Broadway, NY, NY 10006				
CITY-ST-ZIP	NEW YORK, NY 10006	this filing does not qualify for	CITY-ST-ZIP			•		
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 if made under oath; that I am an officer or director of the corporation or the receiver or trustee emoware 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:  Lisa D. Levey, Asst. Secretary 04/30/08 212-858-7108  SIGNATURE:  Date Dayling Proper #							58-7108	
	SIGN TORE AND ITPED DR	MANAGE OF SIGNING OFFICER O	M DIRECTOR		Date	Daytime Pho (J. To	ome# ompkins)	