

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005630

FILED
Apr 21, 2009
Secretary of State

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

Current Principal Place of Business:

16, RUE NOTRE DAME
LUXEMBOURG
GRAND DUCHY OF LUXEMBOURG, L2240

New Principal Place of Business:

16 RUE NOTRE DAME
LUXEMBOURG
GRAND DUCHY OF LUXEMBOURG, LU L2240

Current Mailing Address:

THREE WORLD FINANCIAL CENTER
200 VESEY STREET 8TH FLOOR
NEW YORK, NY 102811021

New Mailing Address:

FEI Number: 48-0358048 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEOP () Delete
Name: TAVOSO, RICHARD
Address: 1 LIBERTY PLAZA ,165 BROADWAY
City-St-Zip: NEW YORK, NY 10006

Title: COO () Delete
Name: COHEN, LAWRENCE
Address: 1 LIBERTY PLAZA ,165 BROADWAY
City-St-Zip: NEW YORK, NY 10006

Title: CCO () Delete
Name: HARE-BEY, DWAYNE
Address: 1 LIBERTY PLAZA ,165 BROADWAY
City-St-Zip: NEW YORK, NY 10006

Title: HT () Delete
Name: MCBRIDE, EDWARD
Address: 1 LIBERTY PLAZA ,165 BROADWAY
City-St-Zip: NEW YORK, NY 10006

Title: AS () Delete
Name: LEVEY, LISA
Address: 1 LIBERTY PLAZA ,165 BROADWAY
City-St-Zip: NEW YORK, NY 10006

Title: CFO () Delete
Name: CHANDLER, EARNEST
Address: 1 LIBERTY PLAZA ,165 BROADWAY
City-St-Zip: NEW YORK, NY 10006

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LISA LEVEY

SEC

04/21/2009

Electronic Signature of Signing Officer or Director

_____ Date