

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005992

FILED  
Feb 15, 2011  
Secretary of State

Entity Name: BANK LEUMI USA

**Current Principal Place of Business:**

420 LEXINGTON AVENUE  
NEW YORK, NY 10170

**New Principal Place of Business:**

**Current Mailing Address:**

420 LEXINGTON AVENUE  
NEW YORK, NY 10170

**New Mailing Address:**

FEI Number: 13-2614394

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SEGAL, AKIVA  
BANK LEUMI USA  
19495 BISCAYNE BLVD. SUITE 801  
AVENTURA, FL 33180 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: EYAL, ITZHAK  
Address: 579 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10017

Title: SVP  
Name: SANFRATELLO, JOHN  
Address: 420 LEXINGTON AVENUE  
City-St-Zip: NEW YORK, NY 10170

Title: SVS  
Name: GLASSMAN, WENDI G  
Address: 562 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10170

Title: T  
Name: GIORDANO, ROBERT  
Address: 564 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10036

Title: C  
Name: RAFF, EITAN  
Address: BANK LEUMI LE ISRAEL  
City-St-Zip: 24-32 YEHUDA HALEVI STREET, TE 61000 IS

I hereby 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 all other like empowered.

SIGNATURE: JOHN SANFRATELLO

SVP

02/15/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date