2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000001300

Entity Name: BANIF SECURITIES INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
40 WALL : 33RD FLC NEW YOR		1305 US			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
40 WALL : 33RD FLC NEW YOF		1305			
FEI Number	r: 13-3781548	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:	
1110 BRIC SUITE 310	PORATE SERV CKELL AVENU 0 . 33131 US				
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,	
SIGNATU					
	Electro	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	FERNANDES, 40 WALL STR) Delete ARTUR SILVA MR. EET, 33RD FLOOR Y 100051305 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DEL PRIORE, 40 WALL STRI) Delete HUGO MR. EET, 33RD FLOOR Y 100051305 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DE ALMEIDA, 40 WALL STRI) Delete DAVID DUARTE MR. EET, 33RD FLOOR Y 100051305 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ALMEIDA, JÕÃ 40 WALL STRI) Delete ,O PAULO MR. EET, 33RD FLOOR Y 100051305 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	D (TEIXEIRA, NUI) Delete NO MR.	Title: Name:	() Change () Addition	
Address: City-St-Zip:	40 WALL STR	EET, 33RD FLOOR Y 100051305 US	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: PRIORE 04/27/2009

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