## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F05000001077

Entity Name

**RBC CAPITAL MARKETS CORPORATION** 

FILED Aug 25, 2006 08:00 Al Secretary of State

Principal Place of Business

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

ONE LIBERTY PLAZA 165 BROADWAY NEW YORK, NY 10006



## DO NOT WRITE IN THIS SPACE

08072006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

5. Certificate of Status Desired

13-5033225

\$8.75 Additional Fee Required

Daytime Phone #

Not Applicable

6. Name and Address of Current Registered Agent

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

**SIGNATURE:** 

## DO NOT WRITE IN THIS SPACE

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 reinstalling)  DATE						
FILE NOW!!! FEE IS \$150.00  Due by September 6, 2006  9. Election Campaign Finance Trust Fund Contribution.			~ —	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PCEO STANDISH, MARK ONE LIBERTY PLAZA, 165 BROADW NEW YORK, NY 10006					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GOTTLIEB, PAUL M ONE LIBERTY PLAZA, 165 BROADWAY NEW YORK, NY 10006 S MARTIN, LABRENNA J ONE LIBERTY PLAZA, 165 BROADWAY NEW YORK, NY 10006 T RUNCIMAN, D. BRUCE ONE LIBERTY PLAZA, 165 BROADWAY NEW YORK, NY 10006 CD WINOGRAD, CHARLES ONE LIBERTY PLAZA, 165 BROADWAY NEW YORK, NY 10006				U00000575265 08/25/06-80002-016 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DORP, DIETER ONE LIBERTY PLAZA, 165 BROADV NEW YORK, NY 10006	/AY				
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 reportisting 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 by 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.						

FFICER OR DIRECTOR