**PROFIT** CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90028 037 \*\*\*150.00

## DOCUMENT # F24262

**EXECUTIVE BANKING CORPORATION** 

Principal Place of Business	Mailing Address					
9600 N. KENDALL DR. MIAMI FL 33176-1919	9600 N. KENDALL DR. MIAMI FL 33176-1919		DO NOT WRITE IN TH	IIS SPACÉ		
2. Principal Place of Business	2a. Mailing Address		03/12/1981 4. FEI Number	Applied For		
21 Suite, Apt. #, etc.	26   Suite, Apt. #, etc.	ريم جي ت	59-2093771  5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Cour 24 25	2j Zip 30	Country	This corporation owes the current year Personal Property Tax.	Yes No		
	ress of Current Registered Agent	81 Name	10. Name and Address of New Registers	ed Agent		
VALDES-FAULI, RAUL J. 3400 ONE BISCAYNE TOWER		82 Street Add	2 Street Address (P.O. Box Number is Not Acceptable)			
2 S. BISCAYNE BLVD. MIAMI FL 33131		83		] 7in Code		
	т	84 City	F	85 Zip Code		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent eignature required when reinstating)  DATE										
12.	OFFICERS AND DIREC		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR					
TITLE	P	☐ DELETE	1.1 TITLE	D	Change	Addition				
NAME	SAFIE, ALEJANDRO T		1.2 NAME	EDE, ELIAS N.						
STREET ADDRESS	9600 N KENDALL DRIVE		1.3 STREET ADDRESS	9600 N KENDALL DRIVE						
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	MIAMI FL 33 <u>176</u>						
TITLE	D	☐ DELETE	2.1 TITLE	D	☐ Change	Addition				
NAME	KANE, MONTE		2.2 NAME	ALVAREZ, MARCELO						
STREET ADDRESS	9600 N KENDALL DRIVE		2.3 STREET ADDRESS	9600 N KENDALL DRIVE						
CITY-ST-ZIP	MIAMI FL	<u>.</u>	2.4 CITY-ST-ZIP	MIAMI FL 33176						
TITLE	D	☐ DELETE	3.1 TITLE	P/D	Change	☐ Addition				
NAME :	G.M. SCHWEITZER		3.2 NAME	SAFIE, ALEJANDRO T.						
STREET ADDRESS	9600 N KENDALL DRIVE		3.3 STREET ADDRESS	9600 N KENDALL DRIVE						
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP	MIAMI FL 33176						
TITLE	SRVP	☐ DELETE	4.1 TITLE	S/T/D	💢 Change	☐ Addition				
NAME	BERDY, RICHARD		4. 2 NAME	BÉRDY, RICHARD						
STREET ADDRESS	9600 N KENDALL DRIVE		4.3 STREET ADDRESS	9600 N KENDALL DRIVE		ſ				
CITY-ST-ZIP	MIAMI FL		4.4 CITY-ST-ZIP	MIAMI FL 33176						
TITLE	CEO	☐ DELETE	5.1 TITLE	EVP/D	Change	☐ Addition				
NAME	CARLOS A SAFIE		5.2 NAME	SAFIE, CARLOS A.						
STREET ADDRESS	9600 N KENDALL DRIVE		5.3 STREET ADDRESS	9600 N KENDALL DRIVE						
CITY-ST-ZIP	MIAMI FL		5.4 CITY-ST-ZIP	MIAMI, FL 33176						
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition				
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREET ADDRESS							
CITY-ST-7IP			6.4 CITY+ST-ZIP			Į.				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard Berdy, Secretary/Treasurer (305) 274-8382 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF