2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H14806

Entity Name: TRANSATLANTIC BANK

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

48 EAST FLAGLER STREET
MIAMI, FL 331311020

48 EAST FLAGLER STREET
MIAMI, FL 331311 US

Current Mailing Address: New Mailing Address:

48 EAST FLAGLER STREET
MIAMI, FL 331311020

48 EAST FLAGLER STREET
MIAMI, FL 33131 US

FEI Number: 59-2422390 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MOSKOVITZ, ROBERT S 48 EAST FLAGLER STREET MIAMI, FL 33131 US

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: ROBERT S MOSKOVITZ 04/26/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 ROK, SERGIO
 Name:
 ROK, SERGIO

 Name:
 Non; SERGIO

 Address:
 48 E. FLAGLER ST.

 City-St-Zip:
 MIAMI, FL

 Address:
 48 E. FLAGLER ST.

 City-St-Zip:
 MIAMI, FL

 33131 US

Title: DVC () Delete Title: DVC (X) Change () Addition

 Name:
 MESA, JULIAN L
 Name:
 MESA, JULIAN L

 Address:
 9270 S.W. 93RD AVE
 Address:
 9270 S.W. 93RD AVE

 City-St-Zip:
 MIAMI, FL
 City-St-Zip:
 MIAMI, FL 33176 US

Title: D () Delete Title: D (X) Change () Addition

 Name:
 GOLD, SALOMON
 Name:
 GOLD, SALOMON

 Address:
 48 E FLAGLER ST
 Address:
 48 E FLAGLER ST

 City-St-Zip:
 MIAMI, FL 33131
 City-St-Zip:
 MIAMI, FL 33131 US

Title: D () Delete Title: D (X) Change () Addition

Name:LERMAN, JORGEName:LERMAN, JORGEAddress:48 EAST FLAGLER STAddress:48 EAST FLAGLER STCity-St-Zip:MIAMI, FLCity-St-Zip:MIAMI, FL 33131 US

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: JULIAN L MESA DVC 04/26/2007