

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# J83035

FILED
Jun 07, 2006
Secretary of State**Entity Name:** SUN AMERICAN BANK**Current Principal Place of Business:**3400 CORAL WAY
MIAMI, FL 33145 US**New Principal Place of Business:**1200 NORTH FEDERAL HIGHWAY
SUITE 111-A
BOCA RATON, FL 33432 US**Current Mailing Address:**3400 CORAL WAY
MIAMI, FL 33145 US**New Mailing Address:**1200 NORTH FEDERAL HIGHWAY
SUITE 111-A
BOCA RATON, FL 33432 US**FEI Number:** 59-2688123**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**NICHOLS, ROBERT
3400 CORAL WAY
MIAMI, FL 33145 US**Name and Address of New Registered Agent:**NICHOLS, ROBERT
1200 NORTH FEDERAL HIGHWAY
SUITE 111-A
BOCA RATON, FL 33432 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:

06/07/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: CASTRO, HUGO A
Address: 7411 SW 66TH STREET
City-St-Zip: MIAMI, FL 33143**Title:** D () Delete
Name: MARINELLO, LEONARD F
Address: 600 NE 101 ST.
City-St-Zip: MIAMI SHORES, FL 33138**Title:** D () Delete
Name: VALLE, ALBERTO
Address: 7709 W 15TH AVE
City-St-Zip: HIALEAH, FL 33014**Title:** DC () Delete
Name: GOLDEN, MICHAEL E
Address: 1200 FEDERAL HIGHWAY, SUITE #111
City-St-Zip: BOCA RATON, FL 33432**Title:** D () Delete
Name: PARTRIDGE, JAMES
Address: 3929 GRANADA BLVD
City-St-Zip: CORAL GABLES, FL 33134**Title:** D () Delete
Name: PERRONE, STEPHEN L
Address: 1915 BRICKELL AVE., #706C
City-St-Zip: MIAMI, FL 33129**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
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City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL E. GOLDEN

CHAI

06/07/2006

Electronic Signature of Signing Officer or Director

Date