

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000113305

Entity Name: UNION CREDIT BANK

FILED  
Apr 17, 2009  
Secretary of State

## Current Principal Place of Business:

1150 SOUTH MIAMI AVENUE  
MIAMI, FL 33130

## New Principal Place of Business:

## Current Mailing Address:

1150 SOUTH MIAMI AVENUE  
MIAMI, FL 33130

## New Mailing Address:

FEI Number: 65-1066544

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: AVILA, ALCIDES I  
Address: 12130 SW 68TH AVE.  
City-St-Zip: PINECREST, FL 33156

Title: PD ( ) Delete  
Name: CAPABLANCA, FERNANDO  
Address: 1702 SW 103 PLACE  
City-St-Zip: MIAMI, FL 33165

Title: D ( ) Delete  
Name: RIONDA, CARLOS  
Address: 10310 SW 19 STREET  
City-St-Zip: MIAMI, FL 33186

Title: D ( ) Delete  
Name: MCGUIRE, GRACE V  
Address: ONE GROVE ISLE DR., APT 1102  
City-St-Zip: MIAMI, FL 33133

Title: D ( ) Delete  
Name: RISHMAGUE, MIGUEL  
Address: 13000 MAR STREET  
City-St-Zip: CORAL GABLES, FL 33156

Title: D ( ) Delete  
Name: RISHMAGUE, ODDE  
Address: CAMINO DEL CONDOR, 7821  
City-St-Zip: VITACURA SANTIAGO, CHILE,

## 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  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 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: MIGUEL RISHMAGUE

D

04/17/2009

Electronic Signature of Signing Officer or Director

Date