

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000062830

Entity Name: FIRST BANK OF MIAMI SHARES, INC.

FILED
May 29, 2007
Secretary of State

Current Principal Place of Business:

2317 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134 US

New Principal Place of Business:

255 ARAGON AVENUE
3RD FLOOR
CORAL GABLES, FL 33134 US

Current Mailing Address:

2317 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134 US

New Mailing Address:

255 ARAGON AVENUE
3RD FLOOR
CORAL GABLES, FL 33134 US

FEI Number: 65-1122038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
201 S. BISCAYNE BLVD.
#1600(BB)
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: PICCIOTTO, RENE DE
Address: RUE DE LA CORRATERIE 6, CASE POSTALE 5022
City-St-Zip: CH-1211, GENEVE 11, SWITZERL,

Title: DVP () Delete
Name: GARCIA, RAUL R
Address: 2317 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

Title: ST () Delete
Name: GARCIA, RAUL R
Address: 2317 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DVP (X) Change () Addition
Name: GARCIA, RAUL R
Address: 255 ARAGON AVENUE - 3RD FLOOR
City-St-Zip: CORAL GABLES, FL 33134

Title: ST (X) Change () Addition
Name: GARCIA, RAUL R
Address: 255 ARAGON AVENUE - 3RD FL
City-St-Zip: CORAL GABLES, FL 33134

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: SONIA CANESSA-GONZALEZ

SVP

05/29/2007

Electronic Signature of Signing Officer or Director

Date