


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2006 08:00 AM
Secretary of State

DOCUMENT # P08338 1. Entity Name DB PRIVATE CLIENTS CORP.	
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Principal Place of Business C/O DEUTSCHE BANK 60 WALL STREET, NYC60-4006 NEW YORK, NY 10005	Mailing Address C/O DEUTSCHE BANK 60 WALL STREET, NYC60-4006 NEW YORK, NY 10005
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01052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-3276234

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept, the obligations of registered agent.

SIGNATURE: *Sandra L. West* DATE: 2/7/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	UN00000434318 02/24/06-80058-017 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PC HOAGLAND, LEIGH W 280 PARK AVE NEW YORK, NY 10015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAIGH, NICHOLAS 280 PARK AVENUE NEW YORK, NY 10015
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WEST, SANDRA 60 WALL STREET NEW YORK, NY 10005
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT DIGRAZIA, JOE 60 WALL STREET NEW YORK, NY 10005
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MURPHY, ROBERT 280 PARK AVENUE NEW YORK, NY 10006
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Sandra L. West* 2/7/06 212 250-8174