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FILED
Aug 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P25487 (0)

1. Corporation Name

MERRILL LYNCH BANK AND TRUST COMPANY (CAYMAN) LIMITED

Principal Place of Business

Mailing Address

% CORPORATION COMPANY OF MIAMI
1600 MIAMI CENTER, 100 CHOPIN PLAZA
MIAMI FL 33131

% CORPORATION COMPANY OF MIAMI
1600 MIAMI CENTER, 100 CHOPIN PLAZA
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/03/1989

4. FEI Number

13-3507716

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION COMPANY OF MIAMI
201 SOUTH BISCAYNE BLVD
1600 MIAMI CENTER
MIAMI FL 33131-4328

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME COOPER, JOHN C.
STREET ADDRESS 701 BRICKELL AVE. 10 FL
CITY-ST-ZIP MIAMI FL

☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

TITLE D
NAME JESELNICK, JOHN K
STREET ADDRESS 701 BRICKELL AVE 10 FL
CITY-ST-ZIP MIAMI FL

☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

TITLE D
NAME ORDERS, NEIL
STREET ADDRESS ATLANTIC HOUSE, CIRCULAR RD
CITY-ST-ZIP DOUGLAS IS

☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

TITLE D
NAME TAN, DENNIS
STREET ADDRESS 2 RAFFLES LINK
CITY-ST-ZIP SINGAPORE HO

☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

TITLE D
NAME YU, RAYMUNDO A
STREET ADDRESS 2 RAFFLES LINK
CITY-ST-ZIP SINGAPORE HO

☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

TITLE MD
NAME NICHOLSON, JONATHAN S
STREET ADDRESS PO BOX 1164 N/A
CITY-ST-ZIP GRAND CAYMAN CA

☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

John K Jeselnick 8/6/98 305 995 9240

CR2E034 (10/97)