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May 06, 1999 8:00 am
Secretary of State

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**PROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P25487

1. Corporation Name

**MERRILL LYNCH BANK AND TRUST COMPANY (CAYMAN) LI
MITED**

Principal Place of Business

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

Mailing Address

% 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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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

TITLE **D** ☐ DELETE

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

TITLE **D** ☐ DELETE

NAME **JESEJNIK, JOHN K**
STREET ADDRESS **701 BRICKELL AVE 10 FL**
CITY-ST-ZIP **MIAMI FL**

TITLE **D** ☐ DELETE

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

TITLE **D** ☐ DELETE

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

TITLE **D** ☐ DELETE

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

TITLE **MD** ☐ DELETE

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☐ Change ☒ Addition

1.2 NAME **JOSE MARIA MALBRAN**
1.3 STREET ADDRESS **701 BRICKELL AVE 10 FL**
1.4 CITY-ST-ZIP **MIAMI FL 33131**

2.1 TITLE **D** ☐ Change ☒ Addition

2.2 NAME **BRIAN SPLETZER**
2.3 STREET ADDRESS **701 BRICKELL AVE 24 FL**
2.4 CITY-ST-ZIP **MIAMI FL. 33131**

3.1 TITLE **D** ☐ Change ☒ Addition

3.2 NAME **JAIME LUIS VERA**
3.3 STREET ADDRESS **701 BRICKELL AVE 24 FL**
3.4 CITY-ST-ZIP **MIAMI FL, 33131**

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRIAN Spletzer 4/30/99 (305) 995-9281

Date

Daytime Phone #

CR2E034 (11/98)