## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	ANNUAL REPORT Secretary of S  1996 DIVISION OF CORP		*					
	MENT # P950	000583	381	7				
Ι	DALBANCORP INVEST	MENT HOLDING	CORI	PORATION				
Principal Place	ofBusiness	Mailing Address		4 1 1 1 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
Suite		3. Date incorporated or Qualified July 26, 195	3a. Date of L		port			
2. Principal Pla	ace of Business	2a. Maing Andress 26			4. FETNumber		XA	pplied For ot Applicable
Suite, Apt. #	t, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$		Additional equired
Crty & State		Oily & State			Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip 24	Country 25	Zip (29)	Go:	intry	8. This corporation has liability for Florida Statutes Yes	intangible tax ur	ider s	199.032,
24	9. Name and Address of Current				10. Name and Address of New F	tegistered Age	nt	
Valeria Kassandras Airport Tower 2 7270 N.W. 12th Street, Suite 580					phen A, Freeman ess (PO Box Number is Not Acceptat Brickell Key Dr	ole) ••• 0-30	5	
Miami, Florida 33126				84 City M.1.	mi	— I I	15 Zip 3,3	121
11. Pursuant t or register familiar wit	to the provisions of Sections 607.6567 ed agent, or both, in the State of Ploy th, and accept the obligations of Sect	00/0027,1508, Florida Statule 10/1004, change was authorize 607.0505, Florida Statutes	s, the about the	ove named corpor corporation's boar	ation submits this statement for the purid of directors. I hereby accept the app	rpose of changin ointment as reg	ng its re istered	egistered office agent. I am
	Signature, by eather product has not reported in a pro-	a satisfied appearance (NO)	Ste	phen A.	Freeman, Esq.	5/30/9	ıö.	
12.	OFFICERSTAN		13.		ADDITIONS/CHANGES TO OFF			RS IN 12
TITLE	P/D	[]DELEH	4	TIFLE		П	hange	Magnion
NAME	Roberto Reis de			,AMt				
STREET ADDRESS	520 Brickell Key	y Dr., U-3U3		SPREET ADDRESS				
CITY-ST-7IP	Miami, Florida	22±2±		TY SI ZP			Change	nc.tibbA 🔲
TIRLE	VP/CSO   Daniel Aragao de	<del></del> -		IAME	•			
NAME STREET ADORESS	Same address as			STREET ADDRESS	,			
CITY-S1-ZIP	Baille address us	above	241	CITY - ST - ZIP				
THE	VP/CFO	DELETE	3 1	TITLE			Change	Addition
NAMÉ	Fernando Aragao	Albuquerque		VAME.				
STREET ADDRESS	Same address as	above		STREET ADDRESS				
City-St-ZiP	VP/COO			Dify-Si-ZiP Tillf			Change	Addition
TITLE	Pompilio de Albi			NAME		L)	-	-
NAME STREET ADORESS	Same address as	-	R .	SPREET ADDRESS				
CITA- ST - SIE.	Dame address as	WD O V C		CITY - ST - ZIP				
TITLE	S	DELETE		Trite	3000018		Change	Addition
NAMÉ	Stephen A. Free	man	5.2	NAME •	-05/16/9601 <sup>1</sup>		3	
STREET ADDRESS	Same address as		5.3	STREETADDRESS	***225.00	010 033		
CITY-ST-ZIP				CITY ST-ZIP	<u> </u>	<del></del>	Chanas	FT Add the
TITLE		☐ DELETE		DILE		LJ'	Change <b>—</b>	Addition
NAME				NAME			9	ACC.
STREET ADDRESS	1		6.3	STREET ADDRESS			_	- T-C/

64 CITY-ST-ZIP

14. 1 do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 comparation or the recently of trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attaching it states an address.

signature and typed or printed name of signing officer or director Stephen A. Freeman, Secretary

SIGNATURE:

4/29/96 (305) 374-3800