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2002 UNIFORM BUSINESS REPORT (UBR)

Feb 04, 2002 8:00 am P98000093015 **DOCUMENT #** Secretary of State 1. Entity Name 02-04-2002 90008 033 ***150 00 SOFISA BANK OF FLORIDA Principal Place of Business Mailing Address P.O. BOX 562500 14095 S. DIXIE HWY. MIAMI FL 33156 MIAMI FL 33256-2500 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 67-0878433 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Robert M. Londono Street Address (P.O. Box Number is Not Acceptable) 13701 Old Cutler Road Zip Code Miami <u>331</u>58–1<u>336</u> 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. SIGNATURE Signature, typed or (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangib 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. (9/01) X Change Delete Addition TITLE TITLE BURMAIAN, VARUJAN NAME NAME CR2E034 ÍALAMEDA FRANCA 660, APT. 26 STREET ADDRESS STREET ADDRESS 14095 South Dixie Highway SAO PAULO, S.P., BRAZIL CITY-ST-ZIP CITY-ST-ZIP Miami, Florida 33176 TITI F ☐ Delete TITLE Change ☐ Addition Burmaian, Alexandre NAME NAME ALAMEDA FRANÇA 660, APT. 26 14095 South Dixie Highway STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAO PAULO, S.P.,BRAZIL CITY-ST-ZIP · Miami, Flor<u>ida 33176</u> ☐ Change ☐ Addition TITLE ☐ Delete TITLE dominguez, luis v NAME NAME 4477 N.W. 93RD DORAL CT. STREET ADDRESS STREET ADDRESS MIAMI FL 33178 CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Delete TITLE ☐ Addition LONDONO, ROBERT M NAME NAME 13701 OLD CUTLER ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33158-1336 CITY-ST-ZIP ____ Change X Addition TITLE Delete TITLE mueller, george r NAME NAME DONALD L. BURGESS 6058 GLENDALE DR. STREET ADDRESS STREET ADDRESS 1994 Palo Alto Avenue BOCA RATON FL 33433 Villages of Lady Lake, FL 32159 CITY-ST-ZIE CITY-ST-ZIP TITLE Delete TITLE ☐ Addition ROCHA, PAULO M NAME NAME 101 CRANDON BLVD., APT. 377 STREET ADDRESS STREET ADDRESS KEY BISCAYNE FL 33149 CITY-ST-7IP CITY-ST-7IP

13. 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 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 11 or Block 12 if the proportion of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if the proportion of the receiver or trustee. changed, or on an attachment w

SIGNATURE: