

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -4 AM 10: 27

DOCUMENT # G08091 (2)

1. Corporation Name
OCEAN BANK

Principal Place of Business
**780 NW 42ND AVE. (LE JEUNE RD.)
MIAMI FL 33126**

Mailing Address
**780 NW 42ND AVE. (LE JEUNE RD.)
MIAMI FL 33126**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **11/12/1982** 3a. Date of Last Report **03/08/1994**

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

4. FEI Number **58-2237280** 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 has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

**CONSUEGRA, LUIS
780 NW 42 AVE SUITE 300
MIAMI FL 33126**

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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS

TITLE CD
NAME MACEDO, DESOUSA A
STREET ADDRESS 780 NW 42ND AVE, STE 300
CITY-ST-ZIP MIAMI FL

TITLE D
NAME CABRERA, ANTONIO J.
STREET ADDRESS 780 NW 42 AVE, STE 300
CITY-ST-ZIP MIAMI FL

TITLE D
NAME ELORTEGUI, RAFAEL
STREET ADDRESS 780 NW 42 AVE, STE 300
CITY-ST-ZIP CORAL GABLES FL

TITLE D
NAME MONTERO, CARLOS S.
STREET ADDRESS 780 NW 42 AVE, STE 300
CITY-ST-ZIP MIAMI FL

TITLE PD
NAME CONCEPCION, JOSE A.
STREET ADDRESS 780 NW 42 AVE STE 300
CITY-ST-ZIP MIAMI FL

TITLE D
NAME GONZALEZ, ANTONIO A.
STREET ADDRESS 780 NW 42 AVE, STE 300
CITY-ST-ZIP MIAMI FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D Change Addition
1.2 NAME DE SOUSA MACEDO, JOAO
1.3 STREET ADDRESS 780 NW 42ND AVE, STE 300
1.4 CITY-ST-ZIP MIAMI, FL

2.1 TITLE D Change Addition
2.2 NAME DE ABREU, JOSE QUINTINO
2.3 STREET ADDRESS 780 NW 42ND AVE, STE 300
2.4 CITY-ST-ZIP MIAMI, FL

3.1 TITLE D Change Addition
3.2 NAME PEREZ CONCEPCION, BENIGNO
3.3 STREET ADDRESS 780 NW 42ND AVE, STE 300
3.4 CITY-ST-ZIP MIAMI, FL

4.1 TITLE D Change Addition
4.2 NAME CONSUEGRA, LUIS A.
4.3 STREET ADDRESS 780 NW 42ND AVE, STE 300
4.4 CITY-ST-ZIP MIAMI, FL

5.1 TITLE D Change Addition
5.2 NAME REYNALDO, ECTORE
5.3 STREET ADDRESS 780 NW 42ND AVE, STE 300
5.4 CITY-ST-ZIP MIAMI, FL

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110 (0723)(a), 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 007, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an attachment with an addendum.

SIGNATURE: Luis A. Consuegra 3/20/95 (305) 441-5453
SIGNATURE AND TYPED OR PRINTED NAME OF CURRENT OFFICER OR DIRECTOR Date (By/For Name #)