


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 08:00 A
Secretary of State

DOCUMENT # G08091	
1. Entity 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
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DO NOT WRITE IN THIS SPACE



04092007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2237280	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

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

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CD
NAME	DE SOUSA MACEDO, AGOSTINHO
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	SD
NAME	CONSUEGRA, LUIS A
STREET ADDRESS	780 NW 42 AVE, STE 300
CITY-ST-ZIP	MIAMI, FL 33134
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

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 04/27/07-80066-005 158.75

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *Luis A. Consuegra* **Luis A. Consuegra** **4/9/07** **(305) 569-5453**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #