

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000030147

FILED  
Feb 22, 2010  
Secretary of State

Entity Name: BBU BANK

**Current Principal Place of Business:**

150 ALHAMBRA CIRCLE  
SUITE 100  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

150 ALHAMBRA CIRCLE  
SUITE 100  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 20-2768792      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATE SERVICE INC  
806 DOUGLAS ROAD  
SUITE 580  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

CORPORATE SERVICE INC  
355 ALHAMBRA CIRCLE  
SUITE 801  
CORAL GABLES, FL 33134 US

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: CORPORATE SERVICE      02/22/2010  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ESCOTET, JUAN CARLOS  
Address: 150 ALHAMBRA CIR., 100  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: LUJAN, LUIS XAVIER  
Address: 150 ALHAMBRA CIR., 100  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: ROBAU, RAUL  
Address: 150 ALHAMBRA CIR., 100  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: SIGARRETA, AUGUSTO  
Address: 150 ALHAMBRA CIRCLE, STE. 100  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: AYALA, RICARDO  
Address: 150 ALHAMBRA CIR., 100  
City-St-Zip: CORAL GABLES, FL 33134

Title: D  
Name: VALDES-FAULI, RAUL J  
Address: 150 ALHAMBRA CIR., 100  
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARIA M. ESCOTET      CFO      02/22/2010  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date