

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J18236

**Entity Name:** BANCO DO BRASIL AMERICAS

**Current Principal Place of Business:**

1221 BRICKELL AVENUE  
SUITE 2200  
MIAMI, FL 33131

**FILED**  
**Feb 26, 2024**  
**Secretary of State**  
**4076514216CC**

**Current Mailing Address:**

1221 BRICKELL AVENUE  
SUITE 2200  
MIAMI, FL 33131 US

**FEI Number:** 59-2680958

**Certificate of Status Desired:** No

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

OGANEZOV, SAMVEL  
1221 BRICKELL AVENUE SUITE 2200  
MIAMI, FL 33131 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:** SAMVEL OGANEZOV

02/26/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P, CEO, D  
Name ANDRADE, DELANO VALENTIM DE  
Address 1221 BRICKELL AVE  
SUITE 2200  
City-State-Zip: MIAMI FL 33131

Title D  
Name DE VRIES ASHLEY, DIANE  
Address 1221 BRICKELL AVE  
SUITE 2200  
City-State-Zip: MIAMI FL 33131

Title D  
Name CROWELL, CHARLES WAYNE  
Address 1221 BRICKELL AVE  
SUITE 2200  
City-State-Zip: MIAMI FL 33131

Title D  
Name ROUSSAKIS, EMMANUEL N  
Address 1221 BRICKELL AVE  
SUITE 2200  
City-State-Zip: MIAMI FL 33131

Title EVP  
Name CAVALCANTE, BRENNER  
Address 1221 BRICKELL AVENUE  
SUITE 2200  
City-State-Zip: MIAMI FL 33131

Title EVP  
Name OGANEZOV, SAMVEL  
Address 1221 BRICKELL AVENUE  
SUITE 2200  
City-State-Zip: MIAMI FL 33131

Title EVP  
Name COSTA, TEREZA RAQUEL  
Address 1221 BRICKELL AVENUE  
SUITE 2200  
City-State-Zip: MIAMI FL 33131

Title D  
Name ROSSI, GUILHERME ALEXANDRE  
Address 1221 BRICKELL AVENUE  
SUITE 2200  
City-State-Zip: MIAMI FL 33131

*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:** SAMVEL OGANEZOV

EVP

02/26/2024

Electronic Signature of Signing Officer/Director Detail

Date