

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003511

Entity Name: DB USA CORPORATION**Current Principal Place of Business:**1 COLUMBUS CIRCLE
NEW YORK, NY 10019**Current Mailing Address:**1 COLUMBUS CIRCLE
NEW YORK, NY 10019 US**FEI Number:** 13-4060471**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DIRECTOR
Name	GLIBERT, JEFFREY
Address	1 COLUMBUS CIRCLE
City-State-Zip:	NEW YORK NY 10019

Title	DIRECTOR
Name	WERNER, ROBERT
Address	1 COLUMBUS CIRCLE
City-State-Zip:	NEW YORK NY 10019

Title	TREASURER
Name	UPTON, ROBERT
Address	1 COLUMBUS CIRCLE
City-State-Zip:	NEW YORK NY 10019

Title	DIRECTOR
Name	PRICE, PAULA
Address	1 COLUMBUS CIRCLE
City-State-Zip:	NEW YORK NY 10019

Title	CHIEF RISK OFFICER
Name	HUMMEL, JONATHAN
Address	1 COLUMBUS CIRCLE
City-State-Zip:	NEW YORK NY 10019

Title	CHAIRPERSON
Name	HEANEY, MICHAEL
Address	1 COLUMBUS CIRCLE
City-State-Zip:	NEW YORK NY 10019

Title	DIRECTOR
Name	MOORE, DANIEL
Address	1 COLUMBUS CIRCLE
City-State-Zip:	NEW YORK NY 10019

Title	DIRECTOR
Name	O'MARA, WILLIAM
Address	1 COLUMBUS CIRCLE
City-State-Zip:	NEW YORK NY 10019

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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: TAYLOR CHAPMAN-KENNEDY**SECRETARY****03/13/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title PRESIDENT / CEO
Name SIMON, STEFAN
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title ASSISTANT SECRETARY
Name AZIZ, SEAN
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title SECRETARY
Name CHAPMAN-KENNEDY, TAYLOR
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title DIRECTOR
Name EVANS, JOSEPH
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title ASSISTANT SECRETARY
Name GRIFFIN, FRANK
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title DIRECTOR
Name HUMMEL, JONATHAN
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title GENERAL AUDITOR
Name KIM, MONICA
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title DIRECTOR
Name PELZER, KAREN
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title CFO
Name RIVETT, JAMES
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title DIRECTOR
Name WOLF, STEPHANIE
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title DIRECTOR
Name SIMON, STEFAN
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title VP
Name AZIZ, SEAN
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title VP
Name CHAPMAN-KENNEDY, TAYLOR
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title BSA/AML COMPLIANCE OFFICER
Name EVANS, JOSEPH
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title ASSISTANT VICE PRESIDENT
Name GRIFFIN, FRANK
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title DIRECTOR
Name KIM, MONICA
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title GENERAL COUNSEL
Name PELZER, KAREN
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title DIRECTOR
Name RIVETT, JAMES
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019

Title DIRECTOR
Name UPTON, ROBERT
Address 1 COLUMBUS CIRCLE
City-State-Zip: NEW YORK NY 10019