

**APPLICATION**

For the Establishment of an  
International Representative or Administrative Office  
in the State of Florida

Application fee of \$5,000 payable to the  
Office of Financial Regulation  
is attached for deposit to the  
Financial Institutions Regulatory Trust Fund

Org: 43843000000  
Flair Object Code: 001073  
EO: V1  
Revenue Source Code: 230

General Information:

(1) An international banking corporation which seeks a license under Section 663.05, Florida Statutes, to establish an international representative or administrative office in Florida, should submit an original and one copy of the letter application and required appendices accompanied by a check covering the application fee, payable to the order of Office of Financial Regulation. The application fee for an international representative or administrative office is \$5,000. Please note, if the application is denied or withdrawn, the application fee is non-refundable.

(2) At the same time this application is filed with Office of Financial Regulation, an original and ten copies of the application should be sent to:

Ms. Nicky Hennings  
Director of Application Risk  
Federal Reserve Bank of Atlanta  
1000 Peachtree Street, N.E.  
Atlanta, Georgia 30309-4470

LETTER APPLICATION

Director, Division of Financial Institutions  
Office of Financial Regulation  
200 East Gaines Street  
Tallahassee, Florida 32399-0371

Re: Application by an International Banking Corporation for a License  
to Establish an International Representative ( ) Administrative ( )  
office in the State of Florida.

Dear Director \_\_\_\_\_:

\_\_\_\_\_  
\_\_\_\_\_  
(applicant)

whose address is \_\_\_\_\_  
(street address, city, state, country)

is a banking corporation duly organized and licensed under the laws of

\_\_\_\_\_. A duly authenticated copy of its charter and its by-  
(country)

laws or equivalent thereof accompany and are made a part of this application.

The applicant hereby makes application for a license to establish an

international banking office, as referenced above in the State of Florida, for

the purpose of engaging in such activities as are permitted by law.

1. The legal name of the international banking corporation is

\_\_\_\_\_.

2. The intended location of the proposed office is:

\_\_\_\_\_.

(Street or Post Office Address)

\_\_\_\_\_  
(City, County, State, Zip Code)

3. The name(s) of the person(s) who shall be in charge of the business and affairs of the international representative or international administrative office is (are):

Name

Title

*(Appendices 1 and 2 must be completed for each person named here.)*

5. The total amount of the capital accounts of the International Banking Corporation in U.S. dollars is \$\_\_\_\_\_, and this amount is reflected in the Applicant's complete and detailed statements of financial condition as of the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, which accompany and are made a part of this application.

*(Financial statements should be for the most recent fiscal quarter ending or at a minimum within 180 days of the date of the application.)*

6. Authentic copies of the Applicant's Articles of Incorporation and By-Laws are enclosed.

Dated \_\_\_\_\_, 20\_\_\_\_ Applicant: \_\_\_\_\_

By: \_\_\_\_\_

Title: \_\_\_\_\_

(Corporate Seal)



ACKNOWLEDGMENT

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally came \_\_\_\_\_, to me well known, who acknowledged before me that he/she is the \_\_\_\_\_ (Title) of \_\_\_\_\_, the corporation described herein and which executed the foregoing application; that he/she knows the seal of this corporation; that the seal affixed to this application is such corporate seal; that it was so affixed by order of the Board of Directors of the above-stated corporation; and that he/she signed his/her name hereto by like order.

\_\_\_\_\_  
(Signature of Notary Public or other party taking acknowledgment)

(L.S.)

\_\_\_\_\_  
(Title of party taking acknowledgment)

*NOTE: This acknowledgment may be taken with the State of Florida or within any other state of the United States by a notary public. In Countries other than the United States, this acknowledgment may be taken by Certificate of Apostille pursuant to the Convention Abolishing the Requirement of Legalization for Foreign Public Documents (The Hague, October 5, 1961) or by an ambassador, a minister plenipotentiary, a minister extraordinary, a minister resident, a charge d'affaires, a consul-general, a vice consul-general, a deputy consul-general, a consul, a vice-consul, a deputy-consul, a consular agent, a vice consular agent, a commercial agent or a vice-commercial agent of the United States within his/her jurisdiction. The seal of his/her office of the seal of the office to which he/she is attached should be affixed.*

CERTIFICATE OF CAPITAL

In accordance with the provisions of Subsection 663.055(1)(a)(b), Florida Statutes, \_\_\_\_\_, a banking corporation duly incorporated under the laws of \_\_\_\_\_, does hereby certify to the Office of Financial Regulation, that, as of the close of business \_\_\_\_\_, 20\_\_\_\_, the amount of its capital accounts (must be as of the latest fiscal quarter ending or at a minimum of 180 days of the date of the application), including paid-in capital, surplus, and undivided profits, expressed in the currency of the country of its incorporation, and the U.S. dollar equivalents thereof, were:

	<u>Amount</u>	U.S. Dollar <u>Equivalents</u>
Paid-in Capital Stock		
Surplus		
Undivided Profits		
Other (Specify)		
Totals		

Note: Specify rate of exchange ( \_\_\_\_\_ ) and date of quotation ( \_\_\_\_ / \_\_\_\_ / \_\_\_\_ ).

Dated: \_\_\_\_\_, 20\_\_\_\_

By: \_\_\_\_\_

(Seal)

\_\_\_\_\_  
Type name and title of person signing

GENERAL INFORMATION TO BE PROVIDED

1. Provide the name and telephone number of the contact person and/or correspondent.
2. Provide a certificate issued by the banking or supervisory authority of the country in which the international banking corporation is chartered that (a) states that the international banking corporation is duly organized, licensed and lawfully existing in good standing; (b) lists any instance in which the international banking corporation has been convicted of, or pled guilty or nolo contendere to, a violation of any currency transaction reporting or money laundering law which may exist in that country; and (c) states that the banking or supervisory authorities in the home country of the applicant and, if different, the home country of any top tier foreign bank in the ownership chain, do not object to the establishment of the proposed Florida office.
3. Provide a brief biography of the applicant's executive officers and principal shareholders detailing their financial ability, reputation, integrity and experience in managing and directing an international banking corporation.
4. Provide completed biographical forms (Addendums 1 and 2) for the proposed representative or administrative office manager.
5. Provide documentation that the international banking corporation is chartered in a jurisdiction in which any bank having its principal place of business in this state may establish similar facilities or exercise similar powers or that Federal law permits the appropriate federal regulatory authority to issue a comparable license to the international banking corporation.
6. Describe the bank regulatory system in the applicant's home country and, if different, the home country of any top tier foreign bank in the ownership chain. For each bank in a different home country, the descriptions should address:
  - (a) the extent to which the bank is subject to comprehensive supervision or regulation on a consolidated basis by its home country authorities;
  - (b) the powers and functions of bank supervisory authorities; and
  - (c) the frequency and scope of direct or indirect supervisory examinations of banks.

7. Provide a brief history of the applicant including ranking by asset size in its home country and number of offices operated in the home country. Summarize the applicant's experience in international banking to include: the volume and character of its current international business; a description of the structure of the applicant's foreign or international department; the location, number, and asset size of existing foreign offices; and the number of international staff.
8. Provide the following for the applicant:
  - (a) Parent only and consolidated balance sheets showing separately each principal group of assets, liabilities, and capital accounts within 180 days of the date of the application.
  - (b) Parent only and consolidated income statements showing separately each principal source of revenue and expenses through the end of the most recent fiscal quarter and for the most recent fiscal year.
9. Describe the existing operations of the applicant and its ultimate parent, if any, in the United States, including bank and non-bank subsidiaries, branches and agencies, commercial lending companies, and representative offices.
10. Discuss the purpose for establishing the proposed office and the types of services to be offered.
11. Describe the manner in which, and the extent to which, the applicant proposed to direct and supervise the activities of the proposed office. Describe the policies, procedures, and internal audit measures that will be put in place to ensure compliance with applicable state and federal laws and regulations.
12. The applicant and its ultimate parent, if any, should provide adequate assurances that such information on the operations or activities of the foreign bank and any of its affiliates will be provided to OFR as OFR deems necessary in order for it to determine and enforce compliance with applicable state and federal laws and regulations.
13. Describe whether there exist any secrecy laws or other impediments that would restrict the ability of the applicant and its ultimate parent, if any, to provide information to the Department to determine and enforce compliance with applicable state and federal laws and regulations. If any impediments exist, explain how the applicant and the ultimate parent, if any, propose to provide to OFR with adequate assurances of access to such information.
14. Provide a certified copy of that information required to be submitted in accordance with provisions of Chapter 607, Florida

Statutes, which are applicable to foreign corporations.

15. Submit a copy of applicant's articles of incorporation and a copy of its bylaws or an equivalent thereof satisfactory to OFR.
16. Provide a list of six United States domestic bank references that are familiar with your bank. Include the name and address of the bank and the name and title of a contact person at the bank.

## ***INTERAGENCY BIOGRAPHICAL AND FINANCIAL REPORT***

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Public reporting burden for this collection of information is estimated to average 2 hours for biographical information and 2 hours for financial information. This estimate includes time to gather and maintain data in the required form, to review instructions, and to complete the information collection. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Office of the Executive Secretary, Federal Deposit Insurance Corporation, 550 17th Street, NW, Washington, DC 20429; Secretary, Board of Governors of the Federal Reserve System, 20th and C Streets, NW, Washington, DC 20551; Licensing Policy and Systems Division, Comptroller of the Currency, 250 E Street, S.W., Washington, DC 20219; or Corporate Activities Division, Office of Thrift Supervision, 1700 G Street, N.W., Washington, DC 20552; and to the Office of Management and Budget, Paperwork Reduction Project, Washington, DC 20503.

An organization or a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.

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### **GENERAL INFORMATION AND INSTRUCTIONS**

This *Interagency Biographical and Financial Report* (report) is used by **individuals**<sup>1</sup> in conjunction with other corporate filings to the appropriate regulatory agency. This report is not a stand alone document.

#### **Preparation**

Use of this report is not mandatory. Alternative formats, if used, however, must provide all requested information, including the certification of correctness. All questions must be answered with complete and accurate information that is subject to verification. If the answer is "none," "not applicable," or "unknown," so state. Answers of "unknown" should be explained. The questions are not intended to duplicate information supplied on another form or in an exhibit; a cross reference to the information is acceptable. If this report is used, questions should be answered in the space provided. Use additional sheets as necessary. Each regulatory agency will provide additional instructions for use and preparation. If the report is not complete, the regulatory agency may either request additional information or return the filing. If you are a foreign national or a United States citizen who currently resides in a foreign country, additional information will be necessary.

Financial statements from individuals must be submitted as of a date not more than 90 days prior to the date the financial report is submitted. All amounts in this report must be based on current market value in United States dollars, rounded to the nearest thousand dollars, and agree with any totals in the supplementary schedules. In addition to the sample financial schedules, you may wish to provide supplementary schedules for other items on the financial statement. If the sample financial statement is used, an answer is required to each item. If the filer chooses to use another format, the information filed must be responsive to each request for information contained in the sample format. In addition, each regulatory agency specifically reserves the right to require up to five years of financial data from any acquiring person as well as the filing of additional information and/or statements, such as a Federal income tax return or a current appraisal to support an asset's value.

If a filer has been convicted of any criminal offense involving dishonesty, breach of trust, or money laundering, or has agreed to enter into a pretrial diversion or similar program in connection with a prosecution of such offense (12 U.S.C. § 1829), the filer must obtain approval from the FDIC before being employed in or being an affiliated party with a depository institution.

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<sup>1</sup>A **company** seeking to directly or indirectly acquire control of a bank or thrift should consult with the appropriate regulatory agency for filing instructions.

Each filer must report promptly any material change in the biographical report and/or financial condition that occurs during the review period for this filing. For additional information regarding the processing procedures and guidelines and any supplemental information that may be required, please refer to the appropriate regulatory agency's procedural guidelines (i.e., Comptroller's Corporate Manual, the FRB's Processing Applications Through the Federal Reserve System and the Applications Procedures Manual, the FDIC's Rules and Regulations (12 C.F.R. § 303.14) and relevant policy statements, or OTS' Application Processing Handbook) or contact the agency directly for specific instruction.

### **Confidentiality**

In general, requests for confidential treatment of specific portions of the application must be submitted in writing concurrently with the submission of the application and must discuss the justification for the requested treatment.

Applicant's reasons for requesting confidentiality should specifically demonstrate the harm (e.g., to its competitive position, invasion of privacy) that would result from public release of information (5 U.S.C. 552). Information for which confidential treatment is requested should be (1) specifically identified in the public portion of the application (by reference to the confidential section); (2) separately bound; and (3) labeled "Confidential." Applicant should follow the same procedure regarding a request for confidential treatment with regard to the subsequent filing of supplemental information to the application.

An Applicant should contact the appropriate regulatory agency for specific instructions regarding requests for confidential treatment. The appropriate regulatory agency will determine whether the information submitted as confidential will be so regarded and will advise the Applicant of any decision to make available to the public information labeled as "Confidential."

**INTERAGENCY BIOGRAPHICAL AND FINANCIAL REPORT**

This is filed with respect to:

\_\_\_\_\_  
Name of Subject Institution or Holding Company, Location

<b>Type of Filing</b>	<b>Position</b>
<input type="checkbox"/> Bank/Thrift Charter	<input type="checkbox"/> Organizer
<input type="checkbox"/> Bank/Thrift Holding Company	<input type="checkbox"/> Director
<input type="checkbox"/> Change in Bank Control	<input type="checkbox"/> Senior Executive Officer
<input type="checkbox"/> Change in Senior Executive Officer or Director	<input type="checkbox"/> Principal Shareholder
<input type="checkbox"/> Citizenship Waiver	<input type="checkbox"/> Trustee
<input type="checkbox"/> Charter Conversion	<input type="checkbox"/> Manager
<input type="checkbox"/> Deposit Insurance	<input type="checkbox"/> Other _____
<input type="checkbox"/> Federal Branch or Agency	
<input type="checkbox"/> Other _____	

**BIOGRAPHICAL REPORT**

**1. Personal Information**

(a) Name \_\_\_\_\_  
(Last) (First) (Middle--no initials)

(b) Residence \_\_\_\_\_  
(Street Address)  
\_\_\_\_\_  
(City) (State) (Zip Code)

(c) If at residence less than five years, list addresses and dates occupied for past five years.

Date From Date To Number and Street City State Zip Code

(d) Date of birth \_\_\_\_\_  
(Month) (Day) (Year)

(e) Place of birth \_\_\_\_\_  
(City) (State) (Country)

(f) Social Security No. \_\_\_\_\_

(g) Citizenship \_\_\_\_\_  
(Country) (Date, if Naturalized)

(h) If not a U.S. citizen, Passport No. \_\_\_\_\_

Home Country ID No. \_\_\_\_\_

Father's name and Mother's maiden name: \_\_\_\_\_

Immigration File No. \_\_\_\_\_

(i) Telephone and fax numbers where you may be reached during business hours:

\_\_\_\_\_  
(Area Code) (Telephone Number) (Fax Number)

(j) Trade names and/or other names used in place of given name and period of and reason for use.

Name                      Period of Use                      Reason for Use

## 2. Employment Record

(a) List employment in reverse chronological order for the last five years.

Date	Date	Name/Location (City, State)	Position Held/	Reason for
<u>From</u>	<u>To</u>	<u>Nature of Business</u>	<u>Nature of Duties</u>	<u>Leaving</u>

(b) Have you ever been dismissed or asked to resign from any past employment, including a less than honorable discharge from military service?  Yes  No

If "yes," complete the following:

Employer's Name/ <u>Address/Telephone</u>	<u>Position</u>	Date of <u>Discharge</u>	<u>Explanation</u>
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**3. Education and Professional Credentials**

List each (a) diploma/degree from high schools, colleges, universities, or other schools, and (b) professional license or similar certificate you now hold or have held (for example, Attorney, Physician, CPA, NASD or SEC registration).

(a) School's Name/Location From To Degree

(b) License Issuing Authority Date Issued Expiration

**4. Business and Banking Affiliations**

(a) List any businesses (corporation, partnership, joint venture, trustee) with which you are associated.

Business Name/ <u>Location</u>	Nature of <u>Business</u>	Position/ <u>Relationship</u>	Percent <u>Ownership</u>	<u>From</u>
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**Privacy Act Notice**

A copy of this document is provided to the appropriate regulatory agency as required under various statutes and implementing regulation(s). To the extent that it contains personal and financial information about persons, the information may be subject to the Privacy Act of 1974

(5 U.S.C. § 552a) which provides safeguards for personal information. The appropriate regulatory agency may, at its discretion, disclose any or all of the information obtained concerning you to other regulatory agencies or other law enforcement or governmental agencies, in connection with the investigation of a possible violation of any federal or state statute or when such release is determined to be in the best interest of the appropriate regulatory agency and consistent with the public interest and applicable law. The appropriate regulatory agency may obtain information about you from any and all sources without limitation. These documents are considered confidential and generally are exempt from public disclosure under the authority of 5 U.S.C. § 552, relating to a personnel, medical, or similar record, including a financial record, or any portion thereof, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

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**CERTIFICATION**

I understand that the appropriate regulatory agency may conduct extensive checks into my background, experience, and related matters in conjunction with my application or filing. I certify that the information contained in the biographical report and/or financial report has been carefully examined by me and is true, correct, and complete. I acknowledge that any misrepresentation or omission of a material fact, with respect to the foregoing, constitutes fraud in the inducement and may subject me to legal sanctions provided by 18 U.S.C. §§ 1001 and 1007.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print or type name

\_\_\_\_\_  
Title (if applicable)

**AUTHORIZATION FOR RELEASE OF CONFIDENTIAL INFORMATION**

**TO WHOM IT MAY CONCERN:**

I, \_\_\_\_\_, hereby authorize and request every person, firm, officer, corporation, association, organization or institution having control of any documents, records or other information pertaining to me to furnish the original or copies of any such documents, records or other information to OFR or any of its authorized representatives for purposes of inspection or copying pursuant to Florida Statutes.

(Valid for six (6) months from date signed)

\_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally came \_\_\_\_\_, to me well known, who acknowledged before me that he is the \_\_\_\_\_ of \_\_\_\_\_, the corporation described herein and which executed the foregoing application certificate; that he knows the seal of said corporation; that the seal affixed to said application certificate is such corporate seal; that it was so affixed by order of the Board of Directors of said corporation, and that he signed his name hereto by like order.

(L.S.)

\_\_\_\_\_  
**(Signature of Notary Public or other party taking acknowledgment)**

\_\_\_\_\_  
**(Title of party taking acknowledgment)**

Note: This acknowledgment may be taken within the State of Florida or within any other state of the United States by a notary public. In countries other than the United States, this acknowledgment may be taken by certificate of apostille pursuant to the Convention Abolishing the Requirement of Legalization for Foreign Public Documents (The Hague, October 5, 1961) or by an ambassador, a minister plenipotentiary, a minister extraordinary, a minister resident, a charge d'affairs, a consul-general, a vice consul-general, a deputy consul-general, a consul, a vice-consul, a deputy-consul, a consular agent, a vice consular agent, a commercial agent or a vice-commercial agent of the United States within his jurisdiction. The seal of his office or the seal of the office to which he is attached should be affixed.