

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 13, 2000 8:00 am**  
**Secretary of State**

04-13-2000 90076 040 \*\*\*150.00

**DOCUMENT # 851586**  
 1. Entity Name  
**BANCO ATLANTICO, S.A.**

Principal Place of Business      Mailing Address  
**BANCO ATLANTICO**      **% RAUL J. VALDES-FAULI, ESO.**  
**801 BRICKELL AVE 8TH FL**      **2 S. BISCAYNE BLVD.. #3400**  
**MIAMI FL 33131**      **MIAMI FL 33131-1802**  
**US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
 City & State      City & State  
 Zip      Country      Zip      Country

4. FEI Number **13-2902678**      Applied For  
 Not Applicable  
 5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**VALDES-FAULI-CORPORATE SERVICES INC**  
**2 S. BISCAYNE BLVD.**  
**3400 ONE BISCAYNE TOWER**  
**MIAMI FL 33131**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

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.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_  
 Signature, typed or printed name of registered agent and title if applicable

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PCE	ABDULLATIF, AHMED	GRAN VIA NO. 48	MADRID, SPAIN	<input type="checkbox"/>
V	SANCHEZ PEDRENO, ANTONIO	GRAN VIA NO. 48	MADRID, SPAIN	<input checked="" type="checkbox"/>
VPS	MARTINEZ, EMILIO	2 S. BISCAYNE BLVD #3400	MIAMI FL	<input type="checkbox"/>
D	FERNANDEZ, OLIMPIO	GRAN VIA NO 48	MADRID SP	<input type="checkbox"/>
VP	VALBUENA, FELIPE	2 S BISCAYNE BLVD	MIAMI FL 33131	<input type="checkbox"/>
D	HERNANDEZ FONT, JOSE M	2 S BISCAYNE BLVD #3400	MIAMI FL	<input checked="" type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
V	Montecelos, Manuel	Gran Via No. 48	Madrid, Spain	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VPS	Lladó, Maurici	2 S. Biscayne Blvd #3400	Miami, FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	Martinez, Emilio	2 S. Biscayne Blvd #3400	Miami, FL	<input checked="" type="checkbox"/>	<input type="checkbox"/>

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE FELIPE VALBUENA      (305) 374-7575      April 5, 2000  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/99)