

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004492

FILED
Apr 16, 2007
Secretary of State

Entity Name: BANCO DE CREDITO DEL PERU

Current Principal Place of Business:

121 ALHAMBRA PLAZA
SUITE 1200
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

121 ALHAMBRA PLAZA
SUITE 1200
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLAND & KNIGHT LLP
701 BRICKELL AVE., STE. 3000
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: ROMERO, DIONISIO
Address: 701 BRICKELL AVE., STE. 3000
City-St-Zip: MIAMI, FL 33131

Title: VC () Delete
Name: NICOLINI, LUIS
Address: 701 BRICKELL AVE., STE. 3000
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: CAMET, JORGE
Address: 701 BRICKELL AVE., STE. 3000
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: FORT, FERNANDO
Address: 701 BRICKELL AVE., STE. 3000
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: LLOSA, REYNALDO
Address: 701 BRICKELL AVE., STE. 3000
City-St-Zip: MIAMI, FL 33131

Title: D () Delete
Name: NIERI, LUIS
Address: 701 BRICKELL AVE., STE. 3000
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALVARO CORREA

MANA

04/16/2007

Electronic Signature of Signing Officer or Director

_____ Date