

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# S39688

**FILED**  
**Jan 26, 2016**  
**Secretary of State**  
**CC5006505664**

**Entity Name:** PROBAN INTERNATIONAL CORPORATION

**Current Principal Place of Business:**

CALLE 52 NO. 47-42  
PISO 16  
MEDELLIN, COLOMBIA 00000

**Current Mailing Address:**

999 PONCE DE LEON BLVD  
SUITE 900  
CORAL GABLES, FL 33134 US

**FEI Number:** 65-0250772

**Certificate of Status Desired:** Yes

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

BERKOWITZ DICK POLLACK & BRANT  
200 SOUTH BISCAYNE BLVD, 6 FLR  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT, OFFICER, DIRECTOR  
Name            CARDONA, JUAN L  
Address        CALLE 52 NO. 47-42  
                  PISO 16  
City-State-Zip: MEDELLIN 00000

Title            TREASURER, SECRETARY  
Name            MEJIA, IVAN  
Address        CALLE 52 NO. 47-42  
City-State-Zip: MEDELLIN COLOMBIA P.16

Title            DIRECTOR  
Name            PENAGOS, OSCAR E  
Address        CALLE 52 NO. 47-42  
                  PISO 16  
City-State-Zip: MEDELLIN 00000

Title            DIRECTOR  
Name            ZAPATA, ROSALBA  
Address        CALLE 52 NO. 47-42  
                  PISO 16  
City-State-Zip: MEDELLIN 00000

Title            VP  
Name            GAVIRIA, JORGE JULIAN  
Address        CALLE 52 NO. 47-42  
                  PISO 16  
City-State-Zip: MEDELLIN 00000

Title            DIRECTOR  
Name            JUAN, ESTEBAN ALVAREZ  
Address        CALLE 52 NO. 47-42  
                  PISO 16  
City-State-Zip: MEDELLIN 00000

*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:** JUAN LUIS CARDONA

**PRESIDENT**

**01/26/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date