

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005177

FILED
Mar 24, 2015
Secretary of State
CC7095343712

Entity Name: BANCO FINANCIERA COMERCIAL HONDURENA, S.A. (BANCO FICOHSA) CORP.

Current Principal Place of Business:

2000 PONCE DE LEON BLVD.
SUITE 639
CORAL GABLES, FL 33134

Current Mailing Address:

1395 BRICKELL AVE., 14TH FL-JHF
MIAMI, FL 33131-3302

FEI Number: 20-4437728

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRIEDHOFF, JOHN HESQUIRE
1395 BRICKELL AVE., 14TH FL
MIAMI, FL 33131-3302 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 P
Name ATALA, CAMILO
Address EDIFICIO PLAZA VICTORIA
COL. LAS COLINAS BLVD. FRANCIA
City-State-Zip: TEGUCIGALPA M.D.C.

Title V
Name ATALA, JAVIER
Address EDIFICIO PLAZA VICTORIA
COL. LAS COLINAS BLVD. FRANCIA
City-State-Zip: TEGUCIGALPA M.D.C.

Title V
Name STEFAN, SERGIO
Address EDIFICIO PLAZA VICTORIA
COL. LAS COLINAS BLVD. FRANCIA
City-State-Zip: TEGUCIGALPA M.D.C.

Title MGR
Name MAYR, ALEX
Address 2000 PONCE DE LEON BLVD. STE.
639
City-State-Zip: CORAL GABLES FL 33134

Title D
Name FARAJ, JORGE A
Address EDIFICIO PLAZA VICTORIA
COL. LAS COLINAS BLVD. FRANCIA
City-State-Zip: TEGUCIGALPA M.D.C.

Title D
Name ATALA, JUAN C
Address EDIFICIO PLAZA VICTORIA
COL. LAS COLINAS BLVD. FRANCIA
City-State-Zip: TEGUCIGALPA M.D.C.

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: CAMILO ATALA

PRESIDENT

03/24/2015

Electronic Signature of Signing Officer/Director Detail

Date