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May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 855016 (2)

1. Corporation Name
BANCO MERCANTIL, S.A.C.A. "COMPANY"

Principal Place of Business	Mailing Address
2199 PONCE DE LEON BLVD CORAL GABLES FL 33134	2199 PONCE DE LEON BLVD CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/20/1982

4. FEI Number: 59-2227533 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 220 ALHAMBRA CIRCLE	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 CORAL GABLES	28 City & State
24 33134 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

CORPORATION COMPANY OF MIAMI
100 CHOPIN PLAZA, 1600 MIAMI CENTER
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M GONZALEZ, ALBERTO B. 2199 PONCE DE LEON BLVD CORAL GABLES FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	220 ALHAMBRA CIRCLE CORAL GABLES, FL.	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M CANAL, EMILIO P. 2199 PONCE DE LEON BLVD CORAL GABLES FL	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M SANCHEZ, ANA 2199 PONCE DE LEON BLVD CORAL GABLES FL	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M RAMIREZ, BERNARDA 2199 PONCE DE LEON BLVD CORAL GABLES FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M SUAREZ, HENRY 2199 PONCE DE LEON BLVD CORAL GABLES FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	M SALA, ANDRES 2199 PONCE DE LEON BLV CORAL GABLES FL	☒ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	M CARLOS MARIN 200 ALHAMBRA CIRCLE CORAL GABLES, FL.	☐ Change ☒ Addition

CR2E034 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

Ana M. Sanchez — **ANA M. SANCHEZ** — 4/29/98 — (305)442-8512

BANCO MERCANTIL, S.A.C.A
FEI Number: 59-2227533

12.		13.		
Title:	M	Title:		CHANGE
Name:	SALINAS, RAFAEL	Name:		
Street Address:	2199 PONCE DE LEON BLVD.	Street Address:	220 ALHAMBRA CIRCLE	
City-St-Zip:	CORAL GABLES, FL	City-St-Zip:	CORAL GABLES, FL	
Title:	M	Title:		CHANGE
Name:	PINO, LETICIA	Name:		
Street Address:	2199 PONCE DE LEON BLVD.	Street Address:	220 ALHAMBRA CIRCLE	
City-St-Zip:	CORAL GABLES, FL	City-St-Zip:	CORAL GABLES, FL	
Title:	M	Title:		
Name:	POLANCO, CARY	Name:		
Street Address:	2199 PONCE DE LEON BLVD.	Street Address:		
City-St-Zip:	CORAL GABLES, FL	City-St-Zip:		
Title:		Title:	M	ADDITION
Name:		Name:	PATTERSON, MARIA M.	
Street Address:		Street Address:	2199 PONCE DE LEON BLVD.	
City-St-Zip:		City-St-Zip:	CORAL GABLES, FL	