

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.**  
**AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

*Reinstatement*

PROFIT CORPORATION  
**ANNUAL REPORT 1997**

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



**FILED**  
**SECRETARY OF STATE**  
**DIVISION OF CORPORATIONS**

**97 OCT 28 AM 9:02**

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*10/29*

**DOCUMENT # 858354 (4)**

1. Corporation Name  
**BANCO GANADERO, S.A., INCORPORATED**



Principal Place of Business Mailing Address

**1150 SOUTH MIAMI AVENUE MIAMI FL 33130**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		11/04/1983		02/07/1996	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22		27		98-0056000		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		8.75 Additional Fee Required	
23		28		<input checked="" type="checkbox"/>		\$5.00 May Be Added to Fees	
Zip		Country		Zip		Country	
24		25		29		30	
6. Election Campaign Financing Trust Fund Contribution				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.			
<input type="checkbox"/>				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

**MANOTAS, MANUEL R**  
**1150 SOUTH MIAMI AVENUE**  
**MIAMI FL 33130**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

**200002333312--1**

83 -10/29/97--01134--002

84 City

**FL** 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 *Manuel R Manotas* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P <input type="checkbox"/> DELETE
NAME	VILLAMIZAR ANGULO, JESUS ENRIQUE
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA
TITLE	EV <input type="checkbox"/> DELETE
NAME	VERGARA GOMESCASSERES, CARLOS EDUARDO
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA
TITLE	V <input checked="" type="checkbox"/> DELETE
NAME	PIEDRAHITA, HERNANDO QUESADA
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA
TITLE	V <input checked="" type="checkbox"/> DELETE
NAME	GONZALEZ, JORGE E.
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA
TITLE	V <input checked="" type="checkbox"/> DELETE
NAME	JIMENEZ CUERVO, JORGE PAUL
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA
TITLE	V <input checked="" type="checkbox"/> DELETE
NAME	SEPULVEDA, JORGE TARAZONA
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	C <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	VILLAMIZAR ANGULO, JESUS ENRIQUE
1.3 STREET ADDRESS	CARRERA 9, NO. 72-21
1.4 CITY-ST-ZIP	SANTAFE DE BOGOTA, COLOMBIA
2.1 TITLE	P, D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	AYALA VARGAS, JOSE MARIA
2.3 STREET ADDRESS	CARRERA 9, NO. 72-21
2.4 CITY-ST-ZIP	SANTAFE DE BOGOTA, COLOMBIA
3.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	GARCIA BILBAO, ANTONIO
3.3 STREET ADDRESS	CARRERA 9, NO. 72-21
3.4 CITY-ST-ZIP	SANTAFE DE BOGOTA, COLOMBIA
4.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	LARGACHA MARTINEZ, MIGUEL
4.3 STREET ADDRESS	CARRERA 9, NO. 72-21
4.4 CITY-ST-ZIP	SANTAFE DE BOGOTA, COLOMBIA
5.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	GORRIA GARCIA-PENUELA, CARLOS ALBERTO
5.3 STREET ADDRESS	CARRERA 9, NO. 72-21
5.4 CITY-ST-ZIP	SANTAFE DE BOGOTA, COLOMBIA
6.1 TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	FERRER PASCUAL, MARIANO
6.3 STREET ADDRESS	CARRERA 9, NO. 72-21
6.4 CITY-ST-ZIP	SANTAFE DE BOGOTA, COLOMBIA

14. I do 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.

SIGNATURE *Manuel R Manotas* SIGNATURE *Manuel R Manotas*

CR2E034 (4/97)