

4-30-98 B- 6043 -c
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 858354 (4)
 1. Corporation Name
BANCO GANADERO, S.A., INCORPORATED

Principal Place of Business 1150 SOUTH MIAMI AVENUE MIAMI FL 33130	Mailing Address 1150 SOUTH MIAMI AVENUE MIAMI FL 33130
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DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified 11/04/1983	
4. FEI Number 98-0058000	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <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)
83
84 City
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: *[Signature]* DATE: *4/22/98*

12. OFFICERS AND DIRECTORS

TITLE	C <input type="checkbox"/> DELETE
NAME	VILLAMIZAR ANGULO, JESUS ENRIQUE
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA
TITLE	PD <input type="checkbox"/> DELETE
NAME	AYALA VARGAS, JOSE MARIA
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA
TITLE	V <input type="checkbox"/> DELETE
NAME	GARCIA BILBAO, ANTONIO
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA
TITLE	V <input type="checkbox"/> DELETE
NAME	LARGACHA, MARTINEZ M
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA
TITLE	V <input type="checkbox"/> DELETE
NAME	GORRIA GARCIA-PENUELA, CARLOS ALBERTO
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA
TITLE	V <input type="checkbox"/> DELETE
NAME	FERRER PASCUAL, MARIANO
STREET ADDRESS	CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA
CITY-ST-ZIP	COLUMBIA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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

SIGNATURE: *[Signature]* DATE: *4/22/98* 305-374-3955
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 0176882

CFR2E034 (10/97)