SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

SIGNATURE:

PROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Katherine Harris ANNUAL REPORT Secretary of State 99 JUL 29 PM 1:21 1999 DIVISION OF CORPORATIONS **DOCUMENT #** SECRETATION OF STATE TALLATIASCEE, FLORIDA BANCO GANADERO, S.A., INCORPORATED Principal Place of Business Mailing Address 1150 SOUTH MIAMI AVENUE 1150 SOUTH MIAM! AVENUE MIAMI FL 33130 MIAMI FL 33130 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/04/1983 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 98-0056000 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes the current year Intangible Personal Property. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MANOTAS, MANUEL R 82 Street Address (P.O. Box Number is Not Acceptable) 1150 SOUTH MIAMI AVENUE **MIAMI FL 33130** 83 R4 City 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) (2/99)OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE TITLE DELETE Change Addition VILLAMIZAR ANGULO, JESUS ENRIQUE 1.2 NAME NAME CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA 1.3 STREET ADDRESS STREET ADDRESS COLUMBIA 1.4 CITY-ST-ZIP CiTY-ST-ZIF TITLE 21 TITLE Change Addition PD DELETE NAME AYALA VARGAS, JOSE MARIA 2.2 NAME 900002948539~~9 -08/03/99--01020--014 CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA STREET DOORESS 2.3 STREET ADDRESS **COLUMBIA** \*\*\*\*550.00 \*\*\*\*550.00

Change Addition CITY-S 24 CITY-ST-ZIP 3 1 TITLE TITLE DELETE NAME GARCIA BILBAO, ANTONIO 3 2 NAME CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA STREET ADDRESS 3.3 STREET ADDRESS COLUMBIA CITY-ST-ZIP 3.4 CITY-ST-ZIP 4.1 TITLE TITLE DELETE Change Addition 4.2 NAME NAME LARGACHA, MARTINEZ M STREET ADDRESS CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA 4.3 STREET ADDRESS CITY-ST-ZIP COLUMBIA 4 4 CITY-ST-ZIP TITLE 5 1 TITLE DELETE Change Addition NAME GORRIA GARCIA-PENUELA, CARLOS ALBERTO 5.2 NAME STREET ADDRESS CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA 5.3 STREET ADDRESS COLUMBIA 5 4 CITY-ST-ZIP CITY ST ZIP 6 1 TITLE TITLE Change Addition NAME FERRER PASCUAL, MARIANO 62 NAME STREET ADDRESS CARRERA 9, NO. 72-21, SANTAFE DE BOGOTA 6 3 STREET ADDRESS CITY-ST-ZIP **COLUMBIA** 6.4 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.