

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2003 8:00 am
Secretary of State

01-17-2003 90080 034 ***150.00

DOCUMENT # F01000000285

1. Entity Name
VENEZOLANO DE CREDITO S.A., BANCO UNIVERSAL



Principal Place of Business
**CALLE ALAMEDA. CENTRO EMPRESARIAL DE
CARACAS TORRE VENEZOLANO DE CREDITO
CARACAS VENEZUELA VZ 1011
VZ**

Mailing Address
**1111 BRICKELL AVENUE
SUITE 1575
MIAMI FL 33131
US**

20011004



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **52-2327720**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATE INTERNATIONAL REG. AGENTS, INC.
200 S. BISCAYNE BLVD.
#4100
MIAMI FL 33131**

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

~~After May 1, 2003 Fee will be \$550.00~~

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD MENDOZA, OSCAR G CALLE ALAMEDA CENTRO EMPRESARIAL CARACUS VENEZUELA VZ 1011	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD VELUTINI, JOSE MANUEL CALLE ALAMEDA CENTRO EMPRESARIAL CARACUS VENEZUELA VZ 1011	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOVERA, JOSE RAFAEL CALLE ALAMEDA CENTRO EMPRESARIAL CARACUS VENEZUELA VZ 1011	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MARTINEZ, ANA ISABEL CALLE ALAMEDA CENTRO EMPRESARIAL CARACUS VENEZUELA VZ 1011	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MORALES, PABLO CALLE ALAMEDA CENTRO EMPRESARIAL CARACUS VENEZUELA VZ 1011	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MPO RODRIGUEZ, FERMIN 1111 BRICKELL AVE #1575 MIAMI FL 33131	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CR2E034 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/15/2003

Date

(305) 579-2363

Daytime Phone #