## 2005 FOR PROFIT CORPORATION . . . ANNUAL REPORT

## **FILED** Jan 19, 2005 08:00 AM

| DOCUMENT # F0300004027  1. Entity Name BANCOLOMBIA, S.A.   |   |               |                            | Secretary of State                               |                       |                            |
|--|---|---------------|----------------------------|--|-----------------------|----------------------------|
| Principal Place of Business Mailing Address  1111 BRICKELL AVENUE 1111 BRICKELL AVENUE SUITE 1550 SUITE 1550 MIAMI, FL 33131 MIAMI, FL 33131   |   |               |                            |  |                       |                            |
| DO NOT WRITE IN THIS SPACE   |   |               |                            | 01042005 No Chg-P CR2E034 (10/03)  4. FEI Number |                       |                            |
|  | 6. Name and Address of Current Re   | istered Agent |                            |  |                       |                            |
| SANTIAGO, VILLA 1111 BRICKELL AVENUE #1550 MIAMI, FL 33131-  |   |               | DO NOT WRITE IN THIS SPACE |  |                       |                            |
| 3. The above named entity submits this statement to 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 (NOTE Registered Agent signature required when reinstating)  DATE  |   |               |                            |  |                       |                            |
| FILE NOW!!! FEE IS \$150.00  After May 1, 2005 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees  |   |               |                            |  |                       |                            |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP  | OFFICERS AND DIF<br>PCD<br>SALDARRIAGA, JORGE L<br>CALLE 50, NO. 51-66<br>MEDELLIN, COLOMBIA, | ECTORS        |                            |  | Unionio<br>01/21/05-6 | 185375<br>30012-022 150.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | V<br>BARRERA, FREDERICO O<br>CALLE 50, NO. 51-66<br>MEDELLIN, COLOMBIA,                       |               |                            |  |                       |                            |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | T-ZIP MEDELLIN, COLOMBIA,   |               |                            | DO NOT WRITE                                     |                       |                            |
| TITLE NAME STREET ADDRESS GITY-ST-ZIP  | V<br>VELASQUEZ BOTERO, JAIME A<br>CALLE 50, NO. 51-66<br>MEDELLIN, COLOMBIA,                  |               |                            | <u> </u>   | THIS SPA              | CE                         |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | V<br>NARANJO, LEONARDO H<br>CALLE 50, NO. 51-66<br>MEDELLIN, COLOMBIA,                        |               |                            |  | and and the           |                            |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | V<br>MONTOYA CUSSO, LUIS F<br>CALLE 50, NO. 51-66<br>MEDELLIN, COLOMBIA,                      |               |                            |  |                       |                            |
| 12. I hereby certify that the information supplied with this filling 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: / SANTIAGO VILLA L/11/2005 (305) 5331228  |   |               |                            |  |                       |                            |

SOUTUAGO VILLA
SIGNAPURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR