

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004283

FILED
May 01, 2009
Secretary of State

Entity Name: FIRSTBANK PUERTO RICO

Current Principal Place of Business:

WATERFORD I
701 WATERFORD WAY, SUITE 810
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9146
SAN JUAN, PR 009080146

New Mailing Address:

FEI Number: 66-0183103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF ORLANDO
300 SOUTH ORANGE AVENUE, SUITE 1000
ORLANDO, FL 328015403 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: BEAUCHAMP, LUIS M
Address: 1678 GERANIO ST.
City-St-Zip: SAN FRANCISCO, RIO PIEDRAS, PR

Title: VCFO () Delete
Name: ALEMAN, AURELIO
Address: VIA SAN PAOLO 4, MONTE ALVERNIA
City-St-Zip: GUAYNABO, PR 00927

Title: D () Delete
Name: UMPIERRE CATINCHI, SHAREE ANN
Address: A ST. #17
City-St-Zip: GUAYNABO, PR 00966

Title: D () Delete
Name: IRIZARRY, JORGE DIAZ L
Address: COLA DE ZORRO STREET #88,
City-St-Zip: GUAYNABO, PR 00969

Title: D () Delete
Name: TEIXIDOR, JOSE
Address: 9 RAMON MIMOSO STREET
City-St-Zip: GUAYNABO, PR 00966

Title: D () Delete
Name: DIAZ-IRIZARRY, JORGE L
Address: SAN PATRICIO, 4 CALLE MORA
City-St-Zip: SAN JUAN, PR 00920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VCOO (X) Change () Addition
Name: ALEMAN, AURELIO
Address: VIA SAN PAOLO 4, MONTE ALVERNIA
City-St-Zip: GUAYNABO, PR 00927

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PEDRO ROMERO

Electronic Signature of Signing Officer or Director

VCAO

05/01/2009

Date