
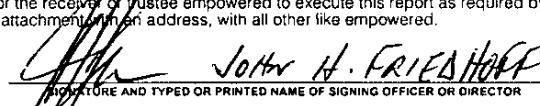


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90075 046 \*\*\*150.00

DOCUMENT # F05000005177					
1. Entity Name BANCO FINANCIERA COMERCIAL HONDURENA, S.A. (BANCO FICOHSA) CORP.					
Principal Place of Business 2000 PONCE DE LEON BLVD. SUITE 639 CORAL GABLES, FL 33134			Mailing Address 1395 BRICKELL AVE., 14TH FL-JHF MIAMI, FL 33131-3302		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>20-4437728</b> <del>NOT APPLICABLE</del>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
FRIEDHOFF, JOHN H ESQUIRE 1395 BRICKELL AVE., 14TH FL MIAMI, FL 33131-3302			Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ATALA, CAMILO	NAME			
STREET ADDRESS	EDIFICIO PLAZA VICTORIA COL LAS COLINAS BL	STREET ADDRESS			
CITY-ST-ZIP	TEGUCIGALPA, MDC HONDURAS,	CITY-ST-ZIP			
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ATALA, JAVIER	NAME			
STREET ADDRESS	EDIFICIO PLAZA VICTORIA COL LAS COLINAS BL	STREET ADDRESS			
CITY-ST-ZIP	TEGUCIGALPA, MDC HONDURAS,	CITY-ST-ZIP			
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	STEFAN, SERGIO	NAME			
STREET ADDRESS	EDIFICIO PLAZA VICTORIA COL LAS COLINAS BL	STREET ADDRESS			
CITY-ST-ZIP	TEGUCIGALPA, MDC HONDURAS,	CITY-ST-ZIP			
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GIANNI, SANDRA	NAME			
STREET ADDRESS	EDIFICIO PLAZA VICTORIA COL LAS COLINAS BL	STREET ADDRESS			
CITY-ST-ZIP	TEGUCIGALPA, MDC HONDURAS,	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	FARAJ, JORGE A	NAME			
STREET ADDRESS	EDIFICIO PLAZA VICTORIA COL LAS COLINAS BL	STREET ADDRESS			
CITY-ST-ZIP	TEGUCIGALPA, MDC HONDURAS,	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ATALA, JUAN C	NAME			
STREET ADDRESS	EDIFICIO PLAZA VICTORIA COL LAS COLINAS BL	STREET ADDRESS			
CITY-ST-ZIP	TEGUCIGALPA, MDC HONDURAS,	CITY-ST-ZIP			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, in an address, with all other like empowered.					
SIGNATURE: 		JOHN H. FRIEDHOFF		Date: 4/17/08	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #: 305 789-9240	