

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003223

FILED  
Feb 25, 2011  
Secretary of State

**Entity Name:** INSTITUTO DE BANCA Y COMERCIO, INC.

**Current Principal Place of Business:**

1660 SANTA ANA STREET  
SAN JUAN, PR 00909

**New Principal Place of Business:**

#56 CARRETERA 20  
GUAYNABO, PR 00966

**Current Mailing Address:**

1660 SANTA ANA STREET  
SAN JUAN, PR 00909

**New Mailing Address:**

#56 CARRETERA 20  
GUAYNABO, PR 00966

**FEI Number:** 66-0328632

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JARMEL, MARIA A ESQ.  
C/O HOMER BONNER  
1200 FOURT SEASONS TOWER, 1441 BRICKELL AV  
MIAMI, FL 33131 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

**OFFICERS AND DIRECTORS:**

**Title:** PCEO  
**Name:** NIGAGLIONI, GUILLERMO  
**Address:** 1660 SANTA ANA STREET  
**City-St-Zip:** SAN JUAN, PR 00909

**Title:** PS  
**Name:** ORMOND, HENRY  
**Address:** 1660 SANTA ANA STREET  
**City-St-Zip:** SAN JUAN, PR 00909

**Title:** D  
**Name:** LEEDS, JEFREY  
**Address:** 1660 SANTA ANA STREET  
**City-St-Zip:** SAN JUAN, PR 00909

I hereby 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 all other like empowered.

**SIGNATURE:** JOSUE MEDINA

C

02/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date