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May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F93000001448 (0)**

1. Corporation Name
BANCO DE SABADELL, S.A.

Principal Place of Business	Mailing Address
801 BRICKELL AVE S1400 MIAMI FL 33131 US	801 BRICKELL AVE S1400 MIAMI FL 33131 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/24/1993

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22:
Suite, Apt. #, etc. — 27:
City & State — 23:
City & State — 28:
Zip — 24: Country — 25:
Zip — 29: Country — 30:

4. FEI Number: 65-0274511 ☐ Applied For ☐ Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**

FRANCES, JOAQUIM
801 BRICKELL AVENUE
MIAMI FL 33131

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	C	☐ DELETE	1.1 TITLE	V	☐ Change ☒ Addition
NAME	VILA, JUAN C		1.2 NAME	TOMAS CASANAS GURI	
STREET ADDRESS	C/ VALERO 9		1.3 STREET ADDRESS	HORTA NOVELLA, 18	
CITY-ST-ZIP	BARCELONA 08021, SPAIN		1.4 CITY-ST-ZIP	SABADELL (BARCELONA) SPAIN	
TITLE	VC	☐ DELETE	2.1 TITLE	JUAN LLONCH ANDREU	☐ Change ☒ Addition
NAME	BRUTAU, BUENAVENTURA G		2.2 NAME	BERTRAN, 81-85.	
STREET ADDRESS	C/ BOSH I GIMPERA 35		2.3 STREET ADDRESS	BARCELONA - SPAIN	
CITY-ST-ZIP	BARCELONA 08034, SPAIN		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE	V	☐ Change ☒ Addition
NAME	ROVIRA, MIGUEL B		3.2 NAME	FRANCESC CASAS SELVAS	
STREET ADDRESS	PL. CATALUNA, 1 P O BOX 1 N/A		3.3 STREET ADDRESS	CREVETA 82. 2°	
CITY-ST-ZIP	08201 SABADELL, SPAIN		3.4 CITY-ST-ZIP	SABADELL (BARCELONA) SPAIN	
TITLE	P	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	CREUS, JOSE O		4.2 NAME		
STREET ADDRESS	RIERA COMO CLARA 15 BIS		4.3 STREET ADDRESS		
CITY-ST-ZIP	ALELLA 08328, SPAIN		4.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	MARISTANY, JUAN MANUEL D		5.2 NAME		
STREET ADDRESS	PLAZA CATALUNA 1		5.3 STREET ADDRESS		
CITY-ST-ZIP	SABADELL 08201, SPAIN		5.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	MOMPART, ESTEBAN M. N		6.2 NAME		
STREET ADDRESS	C/ JOVELLANOS 30		6.3 STREET ADDRESS		
CITY-ST-ZIP	SABADELL 08201, SPAIN		6.4 CITY-ST-ZIP		

CR2E034 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____