## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 13, 2001 8:00 am **DOCUMENT # P19502** Secretary of State 1. Entity Name BANCO STANDARD CHARTERED 2-13-2001 90611 001 \*\*\*317.50 **01 FEB**I-3 Mailing Address Principal Place of Business ATTN: GRISEL VEGA CENTRO BANAVEN, NUCLEO D. PISO 5 AVE. 701 BRICKELL AVE., SUITE 2650 26333 AVE LA ESTANCIA MIAMI\_FL 33131\_\_\_\_\_ CARACAS VE ŪS 3. Mailing Address Attn: DANNY Rodgiguck 2. Principal Place of Business 701 Brickell Aue, Suite Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. FI. 33131 <u>MiAmi</u> Applied For City & State 4. FEI Number City & State 65-0044114 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ROJAS, JULIO Street Address (P.O. Box Number is Not Acceptable) 701 BRICKELL AVE **SUITE 2650 MIAMI FL 33131** Zip Code FL 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title it applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 П

Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition ☐ Change Delete TITLE TITLE Pedro Echeverria NAME NAME VELASQUEZ, JOSE A FONDO DE INVERSIONES De Venezuela STREET ADDRESS STREET ADDRESS FONDO DE INVERSIONES DE VENEZUELA CITY-ST-ZIP CITY-ST-ZIP CATACAS Venezuela CARACAS, VENEZUELA M Addition ☐ Change TITI F MARIANO Crespo FONDO DE Inversiones De Venezuela NAME NAME GREEN. MICHAEL STREET ADDRESS STREET ADDRESS STANDARD CHARTERED BANK CITY-ST-ZIP Venezuela CACACAS CITY-ST-ZIP LONDON EN ☐ Change ☐ Addition Delete TITLE TITLE **BACON, DOMINIC** NAME NAME STREET ADDRESS STREET ADDRESS STANDARD CHARTERED BANK CITY-ST-7iP CITY-ST-ZIP **LONDON EN** C HAIRMAN ☐ Addition ☐ Delete TITLE TITLE NAME LORETTA, DAVID NAME STREET ADDRESS STREET ADDRESS STANDARD CHARTERED BANK CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Change Addition ☐ Delete TITLE TITLE ROJAS, JULIO NAME NAME STREET ADDRESS STREET ADDRESS STANDARD CHARTERED BANK CITY-ST-ZIP CITY-ST-ZIP MIAMI FL CHIEF OPERATIONS OFFICER Change ☐ Addition D ☐ Delete TITLE TITLE GARZA, LUIS CARLOS NAME NAME Standard Chartered BANK STREET ADDRESS STREET ADDRESS STANDARD CHARTERED BANK miami, FL. CITY-ST-ZIP CITY-ST-ZIP CARACAS VE

13. 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 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 vostee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Luis Carlos GAR

JAN.18,200

305-8105563

Daytime Phone #