

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 24, 1999 8:00 am  
Secretary of State

03-24-1999 90016 009 \*\*\*150.00

DOCUMENT # P21218

1. Corporation Name

BANCO GENERAL OVERSEAS, INC.

Principal Place of Business

PO BOX 1097  
GEORGETOWN, GRAND CAYMAN, C.

Mailing Address

PO BOX 1097  
GEORGETOWN, GRAND CAYMAN, C.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/07/1988

4. FEI Number

65-0189381

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

AVILA, ALCIDES I.  
HOLLAND & KNIGHT  
701 BRICKELL AVE  
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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	S	DELETE
NAME	HUMBERT, JUAN RAUL A	
STREET ADDRESS	AVE. A. PAITILLA EDIF MARESIAS	
CITY-ST-ZIP	PANAMA, PANAMA	
TITLE	P	DELETE
NAME	HUMBERT, FREDERICO, JR	
STREET ADDRESS	CALLE 64 Y AVE. 4 CASA #23	
CITY-ST-ZIP	PANAMA, PANAMA	
TITLE	V	DELETE
NAME	MOTTA, FELIPE, JR	
STREET ADDRESS	NUEVO REPARTO EL CARMEN	
CITY-ST-ZIP	PANAMA, PANAMA	
TITLE	T	DELETE
NAME	CARDOZE, FERNANDO	
STREET ADDRESS	ALTOS DEL GOLF, #75	
CITY-ST-ZIP	PANAMA, PANAMA	
TITLE	D	DELETE
NAME	ARIAS, RICARDO A	
STREET ADDRESS	CALLE PRIMERA, PAR.LEF.	
CITY-ST-ZIP	PANAMA, PANAMA	
TITLE	D	DELETE
NAME	CHAPMAN, GUILLERMO III	
STREET ADDRESS	CALLE PRIMERA, PAR. LEF #50	
CITY-ST-ZIP	PANAMA, PANAMA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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, with all other like empowered.

SIGNATURE:

*[Signature]* SIGNATURE REQUIRED  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 11, 1999

Date

(507) 265-0220

Daytime Phone #

CR2E034 (11/98)

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