

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

96 NOV 22 PM 1:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P36751

1. Corporation Name

BANCO POPULAR DEL ECUADOR, S.A.

Principal Place of Business

AVENIDA AMAZONAS 3535
QUITO, ECUADOR

Mailing Address

~~AVENIDA AMAZONAS 3535~~
~~QUITO, ECUADOR~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

701 Brickell Avenue

25th Floor

Miami, Florida

33131

4. Date Incorporated or Qualified
To Do Business in Florida

12/19/1991

5. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☒

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
CD	ROSALLES, FRANCISCO, DR.	AVENIDA AMAZONAS 3535	QUITO, ECUADOR
D	RIBADENEIRA, ERNESTO, DR	AVENIDA AMAZONAS 3535	QUITO, ECUADOR
D	GUTT, SALOMON	AVENIDA AMAZONAS 3535	QUITO, ECUADOR
D	HANDAL, RICHARD	AVENIDA AMAZONAS 3535	QUITO, ECUADOR
D	ROMO LEROUX, CARLOS Villamar, Galo	AVENIDA AMAZONAS 3535 Avenida Amazonas 3535	QUITO-EC Quito, Ecuador
D	KOHN, PEDRO	AVENIDA AMAZONAS 3535	QUITO, ECUADOR
GM	CORREDERA, BARTON K.	701 Brickell Avenue, 25th Fl	Miami, Florida

8. Name and Address of Current Registered Agent

CORPORATION COMPANY OF MIAMI
201 SOUTH BISCAYNE BLVD., SUITE 1500
MIAMI FL 33131

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

700002013377--6

11/26/96-01002-011

383.75 383.75

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Jill Zammara

REGISTERED AGENT MUST SIGN

Asst. Secretary

Date November 21, 1996

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE

[Signature]

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BARTON K. CORREDERA

11/21/96 (305) 536-6150

Date

Daytime Phone #