

AMENDED
2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P7000098851

1. Entity Name

BANCASA, INC.

FILED

01 APR 25 PM 2:56

Principal Place of Business

10050 N.W. 6th Ct.
 Pembroke Pines, FL 33024

Mailing Address

same

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

2. Principal Place of Business

10050 N.W. 6th Court
 Suite, Apt. #, etc.

3. Mailing Address

same as 2.
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Pembroke Pines, Florida

City & State

4. FEI Number

650798180

Applied For

Not Applicable

Zip

33024

Country

Broward

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

Juan P. Jaramillo
 1509 Meadows Blvd.
 Weston, Florida 33327

7. Name and Address of New Registered Agent

Name

Juan Carlos Gaviria

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

5333 Collins Avenue

Penthouse 9

City

Miami Beach

FL

Zip Code

33140

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so. ☐
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE D ☒ Delete
 NAME Juan P. Jaramillo
 STREET ADDRESS 1509 Meadows Blvd.
 CITY-ST-ZIP Weston, FL 33327

TITLE VP ☒ Delete
 NAME Juan Carlos Gaviria
 STREET ADDRESS 5333 Collins Ave., PH9
 CITY-ST-ZIP Miami Beach, FL 33140

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
 200004275732--6
 -05/22/01--01031--007
 *****61.25 *****61.25

TITLE D/P/S ☒ Change ☐ Addition
 NAME Juan Carlos Gaviria
 STREET ADDRESS 5333 Collins Ave., PH9
 CITY-ST-ZIP Miami Beach, FL 33140

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 trustee 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)