2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000030147

Entity Name: BANESCO USA

Current Principal Place of Business:

CORAL GABLES, FL 33134

150 ALHAMBRA CIRCLE **SUITE 1000**

Current Mailing Address:

150 ALHAMBRA CIRCLE **SUITE 1000** CORAL GABLES, FL 33134 US

FEI Number: 20-2768792 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT CORPORATE SERVICES, INC 355 ALHAMBRA CIRCLE SUITE 801 CORAL GABLES, FL 33134 US

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:

Address

Address

Address

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT, CEO Title EXECUTIVE VICE PRESIDENT, CFO

Name SALAS, JORGE Name ESCOTET, MARIA M

150 ALHAMBRA CIRCLE 150 ALHAMBRA CIRCLE Address Address 10TH FLOOR

10TH FLOOR

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title **EXECUTIVE VICE PRESIDENT-CHIEF** Title **DIRECTOR**

LENDING OFFICER Name PALOMARES, CARLOS

Name GARCIA, ALINA D Address 150 ALHAMBRA CIRCLE

150 ALHAMBRA CIRCLE 10TH FLOOR

10TH FLOOR

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title **EXECUTIVE VICE PRESIDENT - CHIEF** EXECUTIVE VICE PRESIDENT, Title

RISK OFFICER OPERATIONS OFFICER

Name PRESTAMO, ALBA Name PINO, LETICIA

Address 150 ALHAMBRA CIRCLE

150 ALHAMBRA CIRCLE 10TH FLOOR 10TH FLOOR

CORAL GABLES FL 33134 City-State-Zip: City-State-Zip: CORAL GABLES FL 33134

SVP INTERNATIONAL Title

Title **DIRECTOR** GRAU, LUIS Name

Name BRIL, ABRAHAM S 150 ALHAMBRA CIRCLE Address

150 ALHAMBRA CIRCLE **SUITE 1000 SUITE 1000**

City-State-Zip: CORAL GABLES FL 33134 CORAL GABLES FL 33134 City-State-Zip:

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARIA M. ESCOTET EVP/CFO 05/02/2018

Electronic Signature of Signing Officer/Director Detail

Date

FILED May 02, 2018

Secretary of State

CC6981747719

Officer/Director Detail Continued:

Title EVP/P.R. COUNTRY MGR

Name ABADIA, MARTIZA

Address 150 ALHAMBRA CIRCLE

SUITE 1000

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR

Name ESCOTET, JUAN CARLOS A

Address 150 ALHAMBRA CIRCLE

SUITE 1000

City-State-Zip: CORAL GABLES FL 33134

Title CHIEF CREDIT OFFICER

Name VOGEL, MICHEL

Address 150 ALHAMBRA CIRCLE

SUITE 1000

City-State-Zip: CORAL GABLES FL 33134

Title HEAD OF SMB & BRANCHES

Name LOPEZ, JOSE

Address 150 ALHAMBRA CIRCLE

SUITE 1000

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR

Name PAREDES, FRANCISCO J

Address 150 ALHAMBRA CIRCLE

SUITE 1000

City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR

Name MARCANO, MIGUEL A

Address 150 ALHAMBRA CIRCLE

SUITE 1000

City-State-Zip: CORAL GABLES FL 33134

Title EVP/CHIEF INFORMATION OFFICER

Name VALLE, JULIO A

Address 150 ALHAMBRA CIRCLE

SUITE 1000

City-State-Zip: CORAL GABLES FL 33134