


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90426 017 ***150.00

DOCUMENT # F9700000301

1. Entity Name
BANCO DE CHILE INCORPORATED



Principal Place of Business
**AHUMADA 251
 SANTIAGO, CHILE, CL**

Mailing Address
**200 S BISCAYNE BLVD
 2700
 MIAMI, FL 33131**

40089910



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

04262007 Chg-P CR2E034 (12/06)

City & State

4. FEI Number
13-3915662

Applied For
 Not Applicable

City & State

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION COMPANY OF MIAMI
 1500 MIAMI CENTER
 201 S. BISCAYNE BLVD.
 MIAMI, FL 33131**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP BERKOWITZ, FERNANDO C AHUMADA 251 SANTAGO, CH <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D/P GRANIFO, PABLO AHUMADA 251 SANTIAGO, CHILE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV LUKSIC- CRAIG, ANDRONICO AHUMADA 251 SANTIAGO, CH <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BUCHI, HERNAN AHUMADA 251 SANTIAGO, CHILE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D AWAD, JORGE AHUMADA 251 SANTIAGO, CHILE, CL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ERGAS, JACOB AHUMADA 251 SANTIAGO, CHILE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MENENDEZ, GONZALO AHUMADA 251 SANTIAGO, CHILE, CL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ESTEVEZ, JAIME AHUMADA 251 SANTIAGO, CHILE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LUKSIC-CRAIG, GULLERMO AHUMADA 251 SANTIAGO, CHILE, CL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FURST, THOMAS AHUMADA 251 SANTIAGO, CHILE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D MANUBENS-MOLTEDO, RODRIGO AHUMADA 251 SANTIAGO, CHILE, CL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PEREZ, FRANCISCO AHUMADA 251 SANTIAGO, CHILE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Roberto Schneider ROBERTO SCHNEIDER
 CEO & COUNTRY MANAGER USA **04/26/07** (212) 758-0909
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

40089910

BANCO DE CHILE

DOCUMENT # F97000000301

ADDITIONAL DIRECTORS:

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DIAZ, JORGE AHUMADA 251 SANTIAGO, CHILE	<input type="checkbox"/> CHANGE	<input checked="" type="checkbox"/> ADDITION
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ERGAS, JORGE AHUMADA 251 SANTIAGO, CHILE	<input type="checkbox"/> CHANGE	<input checked="" type="checkbox"/> ADDITION
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GARCES, FRANCISCO AHUMADA 251 SANTIAGO, CHILE	<input type="checkbox"/> CHANGE	<input checked="" type="checkbox"/> ADDITION
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SILVA, MAXIMO AHUMADA 251 SANTIAGO, CHILE	<input type="checkbox"/> CHANGE	<input checked="" type="checkbox"/> ADDITION