

Hommes Rudolf M  
Form 3  
March 16, 2012

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104  
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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
Â Hommes Rudolf M  
(Last) (First) (Middle)  
2. Date of Event Requiring Statement  
(Month/Day/Year)  
03/16/2012  
3. Issuer Name and Ticker or Trading Symbol  
Andina Acquisition Corp [ANDA]  
4. Relationship of Reporting Person(s) to Issuer  
5. If Amendment, Date Original Filed(Month/Day/Year)

CARRERA 10 NO.  
28-49,Â TORRE A. OFICINA  
20-05  
(Street)

(Check all applicable)

Director  10% Owner  
 Officer  Other  
(give title below) (specify below)

BOGOTA,Â F8Â  
(City) (State) (Zip)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Ordinary Shares	40,000	I	By Capital Advisory Partners L.A. (1)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

**Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security	4. Conversion or Exercise	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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## Edgar Filing: Hommes Rudolf M - Form 3

	Date Exercisable	Expiration Date	(Instr. 4)	Amount or Number of Shares	Price of Derivative Security	Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	
			Title				
Warrants <sup>(2)</sup>	Â <sup>(3)</sup>	Â <sup>(4)</sup>	Ordinary Shares	125,000	\$ 8	I	By Capital Advisory Partners L.A. <sup>(1)</sup>

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Hommes Rudolf M CARRERA 10 NO. 28-49 TORRE A. OFICINA 20-05 BOGOTA, F8	Â X	Â	Â	Â

## Signatures

/s/ Rudolf M.  
Hommes

03/16/2012

<sup>\*\*</sup>Signature of  
Reporting Person

Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, *see* Instruction 5(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) The reporting person is partner and management director of Capital Advisory Partners L.A.

Prior to the effective date of the registration statement relating to the Issuer's initial public offering, an affiliate of the Reporting Person

(2) irrevocably committed to purchase these warrants. The purchases are being made on a private placement basis and will be consummated simultaneously with the consummation of the Issuer's initial public offering.

(3) The warrants will become exercisable upon the later of the completion of an initial business combination and one year from the date of the final prospectus for the Issuer's initial public offering.

(4) The warrants will expire on the third anniversary of the completion of an initial business combination, or earlier upon redemption.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.