FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

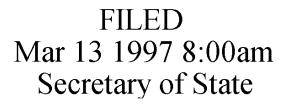
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #
1. Corporation Name

(3)

SOCIEDAD INTERAMERICANA DE PRENSA, INC. (A DELAWA



RE CORPORATION)												
Principal Place of Business		Mailing Address					{		FRICOLOGIS BUBLICOS			
2911 NW 39TH ST MIAMI FL 33142		2911 NW 39TH ST MIAMI FL 33142-5148										
							3. Date Incorporated or Qualified 04/11/1972	3a, [oate of Last R 06/03/19	leport 96		
21	lace of Business	2a. Mailing Address 26					4. FEI Number 13-1678666		ļ ļ	oplied For ot Applicable		
Suite, Apt		Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional equired		
City & State	9	City & State					6. Election Campaign Financing Trust Fund Contribution			May Be to Fees		
Zip 24	Country Zip 29			Country 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					
	9. Name and Address of Current	Registered Agent	•				10. Name and Address of New R	egistered	Agent]	
				81	Name			·				
MUNOZ,	JULIO E / 39Th St.			82	Street	Addres	s (P.O. Box Number is Not Accepta	able)			1	
MIAMI FI				63		· · · · · · · · · · · · · · · · · · ·				······································		
				84	City			Fl	85 Zip	Code	1	
11. Pursuant to office or re	to the provisions of Sections 617.0502 egistered agent, or both, in the State (m familiar with, and accept the obliga	and 617.1508, Florida State of Florida. Such change was	utes, the a	bove d by	named the corp	corpor coration	ation submits this statement for the 's board of directors. I hereby acc	purpose of the ap	of changing i pointment as	ts registered registered]	
_	m lamiliar with, and accept the obliga	ilons or, section o (7.0503, r	TOTION STATE	tules.	,							
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NO	TE: Registere	d Ager	nt alignature	berluger	when reinetating)	DATE	<u></u>			
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECTOR	RS IN 12	7	
TITLE	S	DELETE	1.1 Ti	TLE		V			Change	Addition	٥	
NAME	DAVALOS, HECTOR	DAVALOS, HECTOR				OLI	VER F. CLARKE				1	
STREET ADDRESS	BALDERAS 87		1.3 S	TREET	ADDRESS	7 N	ORTH ST.				Į	
CITY-ST-ZIP	MEXICO			1.4 CITY-ST-ZIP		KIN	GSTON, JAMAICA				18	
TITLE	D	★ DELETE	2.1 Ti	TLE		v	V Change			X Addition	٦٥	
NAME	SEATON, EDWARD		2.2 NAM			ľ	JORGE E. FASCETTO					
STREET ADDRESS	400 S. DELAWARE		2.3 S	TREET	ADDRESS			o. OF	c. 406			
CHY-ST-ZIP	MANHATTAN KA 66502		2.40	2. 4 CITY - ST - ZIP			RIDA 520, 4to. PISONOS AIRES, ARGENTI	NA OTT	101 400			
TITLE	P	DELETE	3.1 TI	TLE		D			Change	Addition	- [
NAME	LAWRENCE, DAVID J		3.2 N	AME		JU	LIO C.F. DE MESQUIT	Ά				
STREET ADDRESS	one Herald Plaza		3.3 S	TREET	ADDRESS	AV.	ENG. CAETANO ALVARE	s, 55			ı	
CITY - ST - 7IP	MIAMI FL		3.4. C	ITY-S	T-ZIP	SAG) PAULO, SP, BRASIL	<u> </u>				
TITLE	T	☐ DELETE	4.1 TI	TLE		D			Change	Addition Addition		
NAME	PEDERSON, TONY		4.21	IAME		ALI	EJANDRO J. AGUIRRE				İ	
STREET ADDRESS	3906 TRAPPERS FOREST		4.3 S	TAEET	ADDRESS		00 NW 39TH. ST.				-	
CITY-ST-ZIP	HOUSTON TX 77088		4.4 C	TY-ST	- ZIP	MI	MI, FL. 33142					
TITLE	D	DELETE	5.1 TI	TLE					Change	Addition		
NAME	MUNOZ, JULIO E		5.2 N	AME								
STREET ADDRESS	7360 SW MONTGOMERY DR		5.3 S	TREET	ADDRESS	1						
CITY-ST-ZIP	MIAMI FL		5.4 C	ITY - ST	-ZIP						╛	
TITLE	V	DELETE	6.1 T)	TLE		P			X Change	Addition	7	
NAME	CANO, LUIS G		6.2 N	AME								
STREET ADDRESS	CARRERA 7A NO 132-10 AP 5	504	6.3 S	TREET /	ADDRESS							
CITY-ST-7IP	BOGOTA, COLOMBIA		6.4 C	ITY-ST	- 21P	<u> </u>						

14. I do 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 enruel report or supplemental annual 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 of the peceiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed, or on an algorithm address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR