## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000001528

Entity Name: HISPANIC MEDIA, INC.

FILED Jul 02, 2007 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
--	-----------------------------

2121 PONCE DE LEON BLVD., SUITE 820 2121 PONCE DE LEON BLVD., SUITE 800

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

2121 PONCE DE LEON BLVD., SUITE 820 2121 PONCE DE LEON BLVD., SUITE 800

CORAL GABLES, FL 33134 CORAL GABLES, FL 33134

FEI Number: 65-0966132 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO ( ) Delete Title: CEO (X) Change ( ) Addition

Name: URBINA, RAFAEL CEO
Address: 2121 PONCE DE LEON BLVD., SUITE 820
Address: URBINA, RAFAEL CEO
Address: 2121 PONCE DE LEON BLVD., SUITE 800

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Name: MCCONNELL, TROY Name: MCCONNELL, TROY

Address: 2121 PONCE DE LEON BLVD., SUITE 820 Address: 2121 PONCE DE LEON BLVD., SUITE 800

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: CFO ( ) Delete Title: CFO (X) Change ( ) Addition

Name: SANTAELLA, HECTOR Name: SANTAELLA, HECTOR

Address: 2121 PONCE DE LEON BLVD., SUITE 820 Address: 2121 PONCE DE LEON BLVD., SUITE 800

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: KIM, JOHN Name: KIM, JOHN

Address: 2121 PONCE DE LEON BLVD., SUITE 820 Address: 2121 PONCE DE LEON BLVD., SUITE 800

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: ROSENBERG, STEVEN Name: ROSENBERG, STEVEN

Address: 2121 PONCE DE LEON BLVD., SUITE 820 Address: 2121 PONCE DE LEON BLVD., SUITE 800

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete Title: D (X) Change ( ) Addition

Name: BOEHM, BRUCE Name: BOEHM, BRUCE

Address: 2121 PONCE DE LEON BLVD., SUITE 820 Address: 2121 PONCE DE LEON BLVD., SUITE 800

City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: HECTOR SANTAELLA CFO 07/02/2007

Electronic Signature of Signing Officer or Director

Date