

FD9000003359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

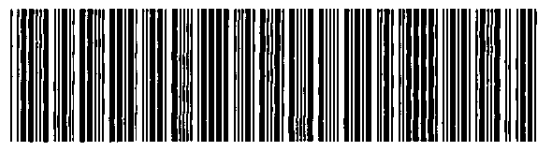
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/19/09--01034--018 **87.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
AND
FILED

[Handwritten signature]



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 22, 2009

SANDRA AUSTIN
2000 PONCE DE LEON BLVD. STE 500
CORAL GABLES, FL 33134

SUBJECT: CINE LATION, INC.
Ref. Number: W09000029004

We have received your document for CINE LATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$2,300.00.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 009A00021141

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Cine Latino, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Sandra Austin

(Name of Person)

Cine Latino, Inc.

(Firm/Company)

2000 Ponce De Leon Blvd. Ste 500

(Address)

Coral Gables, FL 33134

(City/State and Zip code)

For further information concerning this matter, please call:

Cristina M. Suarez

(Name of Person)

at (305) 421-6399

(Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy

Cine Latino, Inc

Date: 4/27/09 ^{Posted} Initials: CAK
_{Paid}

Date: _____ Ref: _____

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Cine Latino, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

(State or country under the law of which it is incorporated)

3. 30-0419442

(FEI number, if applicable)

4. 04/19/2007

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. August 2007

(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2000 Ponce De Leon Blvd., Suite 500, Coral Gables, FL 33134

(Principal office address)

2000 Ponce De Leon Blvd., Suite 500, Coral Gables, FL 33134

(Current mailing address)

8. Engage in any lawful act or activity under the laws of Florida

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Cristina M. Suarez

Office Address: 2000 Ponce De Leon Blvd Ste 500

Coral Gables, Florida 33134

(City)

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Cristina M. Suarez (Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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AND
FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Ernesto Vargas

Address: Bldv Manuel Avila Camacho 147 Col. Chapultepec Los Morales
Mexico DF 11510 Mexico

Vice Chairman: Jose Vargas

Address: Bldv Manuel Avila Camacho 147 Col. Chapultepec Los Morales
Mexico DF 11510 Mexico

Director: James McNamara

Address: 2000 Ponce De Leon Blvd Suite 500
Coral Gables, FL 33134

Director: Alan Sokol

Address: 2000 Ponce De Leon Blvd Suite 500
Coral Gables, FL 33134

B. OFFICERS

President: Sandra Austin (Chief Financial Officer)

Address: 2000 Ponce De Leon Blvd Suite 500
Coral Gables, FL 33134

Vice President: _____

Address: _____

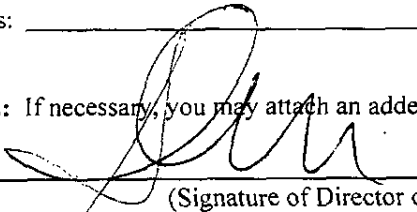
Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.  _____
(Signature of Director or Officer listed in number 12 of the application)

14. Sandra Austin - Chief Financial Officer
(Typed or printed name and capacity of person signing application)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CINE LATINO, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF MAY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

APPROVED
AND
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7316989

DATE: 05-21-09