


FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90118 033 ***150.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # F9700000904			
1. Entity Name SESLA, INC.			
Principal Place of Business 10201 W PICO BLVD LOS ANGELES, CA 90035		Mailing Address P.O. BOX 900- ATTN: TAX DEPT- BEVERLY HILLS, CA 90213-	
2. Principal Place of Business (SAME AS ABOVE)		3. Mailing Address C/O DIRECTV LATIN AMERICA, LLC. Suite, Apt. #, etc. 1211 AVENUE of the AMERICAS	
City & State		City & State NEW YORK, NY	
Zip		Zip 10036	
Country		Country USA	
4. FEI Number 52-2028888		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City FL	
Zip Code		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 _____ <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reconstituting)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	EVD	TITLE	PRESIDENT and DIRECTOR <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BETTSTELLER, KEN	NAME	KEITH SUCHY
STREET ADDRESS	10201 W PICO BLVD	STREET ADDRESS	1211 Avenue of the Americas
CITY-ST-ZIP	LOS ANGELES, CA 90035	CITY-ST-ZIP	NEW YORK, NY 10036
TITLE	D	TITLE	VICE PRESIDENT <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MURDOCH, K. RUPERT	NAME	JACOPO BRACCO
STREET ADDRESS	10201 W PICO BLVD	STREET ADDRESS	1211 Avenue of the Americas
CITY-ST-ZIP	LOS ANGELES, CA 90035	CITY-ST-ZIP	NEW YORK, NY 10036
TITLE	AT	TITLE	SECRETARY & DIRECTOR <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, DAVID E	NAME	MICHAEL A. HARTMAN
STREET ADDRESS	10201 W PICO	STREET ADDRESS	1211 Avenue of the Americas
CITY-ST-ZIP	LOS ANGELES, CA 90035	CITY-ST-ZIP	NEW YORK, NY 10036
TITLE	AS	TITLE	DIRECTOR <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COHEN, LESLEY R	NAME	BRUCE CHURCHILL
STREET ADDRESS	1211 AVENUE OF THE AMERICAS	STREET ADDRESS	1211 Avenue of the Americas
CITY-ST-ZIP	NEW YORK, NY 10036	CITY-ST-ZIP	NEW YORK, NY 10036
TITLE	P	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PONTUAL, ROMOLO	NAME	
STREET ADDRESS	10201 W PICO BLVD	STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES, CA 90035	CITY-ST-ZIP	
TITLE		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
12. I 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 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 DAs empowered.			
SIGNATURE: <i>Michael Hartman</i> / MICHAEL A. HARTMAN		Date: 4/29/05 (212) 462-5036	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	