2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001814

Entity Name: SPANISH BROADCASTING SYSTEM OF DELAWARE, INC.

FILED Jan 08, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2601 SOUTH BAYSHORE DRIVE						
PHII COCONUT GROVE, FL 33133						
Current Mailing Address:				New Mailing Address:		
2601 SOUTH BAYSHORE DRIVE						
PHII COCONUT GROVE, FL 33133						
FEI Number:		FEI Number Applied For ()	FEI Num	nber Not Appli	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and A					Address of	New Registered Agent:
COPROATION SERVICE COMPANY CORPORATION SERVICE COMPANY						/ICE COMPANY
1201 HAYS STREET TALLAHASSEE, FL 32301 US				1201 HAYS STREET TALLAHASSEE, FL 32301 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: CORPORATION SERVICE COMPANY				01/08/2008		
	Electronic	Signature of Registered Agent	t			Date
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address:	ALARCON, RAUL 2601 SOUTH BAY	/SHORE DRIVE,PHII		Title: Name: Address:		() Change () Addition
City-St-Zip: Title: Name: Address: City-St-Zip:	RADLOVIC, MAR	Delete KO /SHORE DRIVE,PHII		City-St-Zip: Title: Name: Address: City-St-Zip:	GARCIA, JOS 2601 SOUTH	(X) Change () Addition SEPH A I BAYSHORE DRIVE,PHII ROVE, FL 33133
Title: Name: Address: City-St-Zip:	GARCIA, JOSEPI	/SHORE DRIVE,PHII		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	VILLAMIL, ANTON	/SHORE DRIVE,PH #2		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	D (X) E FERNANDEZ, AN 2601 SOUTH BAY COCONUT GROV	/SHORE DR PHII		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	D (X) D MASON, DAN R 2601 SOUTH BAY COCONUT GROV			Title: Name: Address: City-St-Zip:		() Change () Addition

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: JOSEPH A. GARCIA CFO 01/08/2008