2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087578

Entity Name: VENEVISION STUDIOS LLC

Apr 18, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

550 BILTMORE WAY, SUITE 900 121 ALHAMBRA PLAZA CORAL GABLES, FL 33134

SUITE 1400

CORAL GABLES, FL 33134 US

Current Mailing Address: New Mailing Address:

550 BILTMORE WAY, SUITE 900 121 ALHAMBRA PLAZA

CORAL GABLES, FL 33134 SUITE 1400

CORAL GABLES, FL 33134 US

FEI Number: 20-1993441 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:

JENSON, JOAN BURTON C/O FINSER CORPORATION 550 BILTMORE WAY, SUITE 900 CORAL GABLES, FL 33134 US

MANAGING MEMBERS/MANAGERS:

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

ADDITIONS/CHANGES:

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

ARISMENDI, ANA TERESA ARISMENDI, ANA T Name: Name: 550 BILTMORE WAY, SUITE 900 Address: 121 ALHAMBRA PLAZA, SUITE 1400 Address:

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

(X) Change () Addition Title: COBD () Delete Title: MGR

BANDEL, STEVEN I. Name: BANDEL, STEVEN I. Name:

Address: 550 BILTMORE WAY, SUITE 900 Address: 121 ALHAMBRA PLAZA, SUITE 1400 City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 US

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

TINOCO, PEDRO R. TINOCO, PEDRO R Name: Name: 550 BILTMORE WAY, SUITE 900 121 ALHAMBRA PLAZA, SUITE 1400 Address: Address:

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

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

Name: JENSEN, JOAN BURTON Name: JENSEN, JOAN B

121 ALHAMBRA PLAZA, SUITE 1400 Address: 550 BILTMORE WAY, SUITE 900 Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOAN BURTON JENSEN 04/18/2007