
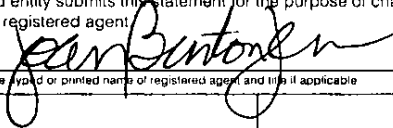
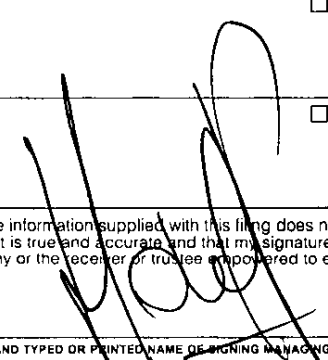


2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED

07 MAY 23 AM 11:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000116298 1. Entity Name VENEVISION INTERNATIONAL PUBLISHING LATIN LLC			
Principal Place of Business 550 BILTMORE WAY SUITE 1180 CORAL GABLES, FL 33134		Mailing Address 550 BILTMORE WAY SUITE 1180 CORAL GABLES, FL 33134	
2. Principal Place of Business - No P.O. Box # 121 Alhambra Plaza		3. Mailing Address 121 Alhambra Plaza	
Suite, Apt. #, etc. Suite 1400		Suite, Apt. #, etc. Suite 1400	
City & State Coral Gables, Florida		City & State Coral Gables, Florida	
Zip 33134		Country USA	
4. FEI Number 20-4134581		Applied For <input type="checkbox"/> Additional <input checked="" type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent DOMINGUEZ, TANIA C/O FINSER CORPORATION 550 BILTMORE WAY, SUITE 900 CORAL GABLES, FL 33134		7. Name and Address of New Registered Agent Name Joan Burton Jensen Street Address (P.O. Box Number is Not Acceptable) 121 Alhambra Plaza, Suite 1400 City Coral Gables FL Zip Code 33134	
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 		Joan Burton Jensen	
Amended AR is \$50.00		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P VILLANUEVA, LUIS MR <input type="checkbox"/> Delete 550 BILTMORE WAY, SUITE 1180 CORAL GABLES, FL 33134	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director and President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VILLANUEVA, LUIS 121 Alhambra Plaza, Suite 1400 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input checked="" type="checkbox"/> Delete PINO, JORGE MR. 550 BILTMORE WAY, SUITE 1180 CORAL GABLES, FL 33134	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director, V.P. and Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition PEREZ, MANUEL 121 Alhambra Plaza, Suite 1400 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AD <input checked="" type="checkbox"/> Delete BELTRAN, JOSE A MR. 550 BILTMORE WAY, SUITE 1180 CORAL GABLES, FL 33134	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition KEON, III, WILLIAM 121 Alhambra Plaza, Suite 1400 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP <input checked="" type="checkbox"/> Delete SANTISTEBAN, JORGE MR. 550 BILTMORE WAY, SUITE 1180 CORAL GABLES, FL 33134	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JENSEN, JOAN BURTON 121 Alhambra Plaza, Suite 1400 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 		Director, V.P. Manuel Perez and Treasurer	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date 4/19/07 Daytime Phone # (305) 442-3450	



04192007 Chg-LLC CR2E083 (12/06)

4. FEI Number 20-4134581

5. Certificate of Status Desired \$5.00 Additional Fee Required

Amended AR is \$50.00

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director and President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VILLANUEVA, LUIS 121 Alhambra Plaza, Suite 1400 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director, V.P. and Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition PEREZ, MANUEL 121 Alhambra Plaza, Suite 1400 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition KEON, III, WILLIAM 121 Alhambra Plaza, Suite 1400 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JENSEN, JOAN BURTON 121 Alhambra Plaza, Suite 1400 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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SIGNATURE:  Director, V.P.
Manuel Perez and Treasurer 4/19/07 (305) 442-3450