

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90068 033 ****50.00



DOCUMENT # M06000001680

1. Entity Name
MAMBO LLC

| | |
|--|--|
| Principal Place of Business 1441 BRICKELL AVE., SUITE 1010 MIAMI, FL 33131 | Mailing Address 1441 BRICKELL AVE., SUITE 1010 MIAMI, FL 33131 |
|--|--|

| | |
|--|--|
| 2. Principal Place of Business - No P.O. Box # WGEN-TV CHANNEL 8 | 3. Mailing Address 701 BRICKELL AVENUE |
|--|--|

| | |
|-----------------------|---|
| 7321 N.W. 75TH STREET | Suite, Apt. #, etc. SUITE #3000 |
|-----------------------|---|

| | |
|--|---------------------------------------|
| City & State MEDLEY, FLORIDA | City & State MIAMI, FLORIDA |
|--|---------------------------------------|

| | | | |
|---------------------|---------|---------------------|---------|
| Zip 33166 | Country | Zip 33131 | Country |
|---------------------|---------|---------------------|---------|

04252007 Chg-LLC CR2E083 (12/06)

| | |
|------------------------------------|--|
| 4. FEI Number 20-3827894 | Applied For <input type="checkbox"/> Not Applicable |
|------------------------------------|--|

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

6. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE., SUITE 3000
MIAMI, FL 33131

7. Name and Address of New Registered Agent

| |
|--|
| Name |
| Street Address (P.O. Box Number is Not Acceptable) |
| City |
| FL 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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____

Filing Fee is \$50.00 Due by May 1, 2007

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR LASERNA, PAULO CANAL CARACOL CALLE 103 NO. 69B - 43 BOGOTA COLOMBIA, <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR CALLE, LUIS CANAL CARACOL, CALLE 103, NO. 50-45 BOGOTA, COLOMBIA, <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR BELTRAN, JUAN M CANAL CARACOL, CALLE 103, NO. 50-45 BOGOTA, COLOMBIA, <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR DE LA PENA, WILLIAM 2446 W. WHITTIER BLVD. MONTEBELLO, CA 90640 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR CANO, CAMILO 7321 N.W. 75 ST. MEDLEY, FL 33166 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Delete |

10. ADDITIONS/CHANGES

| | |
|--|--|
| 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 SEE ADDENDUM ATTACHED |
| 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 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR, PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CANO, CAMILO 7321 N.W. 75 STREET MEDLEY, FL 33166 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR, T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition CARDENAS, RUBEN DARIO CANAL CARACOL - CALLE 103 NO. 69B-43 BOGOTA, COLOMBIA |

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Attachment
M06000001680

**ADDENDUM
TO THE 2007 FLORIDA ANNUAL REPORT FOR
MAMBO LLC
DOCUMENT #M06000001680**

For purposes of clarification listed below are the name, address and title of the Supervising Managers, Managers and Officers:

| <u>Title:</u> | <u>Name and Address:</u> |
|-----------------------|---|
| Supervising Manager | Paulo Laserna Canal Caracol Calle 103 No. 69B-43 Bogotá, Colombia |
| Supervising Manager | Luis Calle Canal Caracol Calle 103 No. 50-45 Bogotá, Colombia |
| Supervising Manger | Juan Manuel Beltran Canal Caracol Calle 103 No. 50-45 Bogotá, Colombia |
| Supervising Manager | Dr. William de la Pena 2446 W. Whittier Blvd. Montebello, CA 90640 |
| Manager and President | Camilo Cano 7321 N.W. 75 St. Medley, FL 33166 |
| Manager and Treasurer | Ruben Dario Cardenas Canal Caracol Calle 103 No. 69B-43 Bogotá, Colombia |