

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000001585

FILED
Apr 15, 2009
Secretary of State

Entity Name: SHOP LATINO NETWORK, LLC

Current Principal Place of Business:

8785 NW 13TH TER
DORAL, FL 33172

New Principal Place of Business:

Current Mailing Address:

8785 NW 13TH TER
DORAL, FL 33172 US

New Mailing Address:

FEI Number: 20-8548491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HASBACH, BERNARDO
8785 NW 13TH TER
DORAL, FL 33172 US

Name and Address of New Registered Agent:

HASCOV LLC
8785 NW 13TH TER
DORAL, FL 33172 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: BERNARDO HASBACH

04/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SLN MANAGEMENT, LLC
Address: 8785 NW 13TH TER
City-St-Zip: DORAL, FL 33172 US

Title: MGRM (X) Delete
Name: MEDIA INNOVATIONS, LLC
Address: 8785 NW 13TH TER
City-St-Zip: DORAL, FL 33172 US

Title: MGRM (X) Delete
Name: HOME SHOPPING HISPANO NETWORK, LLC
Address: 8785 NW 13TH TER
City-St-Zip: DORAL, FL 33172 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: SLN MANAGEMENT, LLC
Address: 8785 NW 13TH TER
City-St-Zip: DORAL, FL 33172 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: BERNARDO HASBACH

MGR

04/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date