2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2008 8:00 am
Secretary of State
04-04-2008 90134 017 ***138.75

DOCUMENT # M99000000555

1. Entity Name
DIRECTV LATIN AMERICA, LLC

Principal Place of Business	Mailing Address
ATTN: MICHAEL HARTMAN, ESQ. 1211 AVENUE OF THE AMERICAS NEW YORK, NY 10036	ATTN: MICHAEL HARTMAN, ESQ. 1211 AVENUE OF THE AMERICAS NEW YORK, NY 10036

DO NOT WRITE IN THIS SPACE

03242008 No Chg-LLC CR2E083 (12/07)

4. FEI Number
94-4517063
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	DIRECTV LATIN AMERICA HOLDINGS, INC.
STREET ADDRESS	2230 E IMPERIAL HWY, BLDG R8
CITY-ST-ZIP	EL SEGUNDO, CA 90245
TITLE	President
NAME	Bruce Churchill
STREET ADDRESS	1211 Avenue of The Americas
CITY-ST-ZIP	New York, NY. 10036
TITLE	SVP, Finance CEO
NAME	Keith Suchy
STREET ADDRESS	1211 Avenue of The Americas
CITY-ST-ZIP	New York, NY. 10036
TITLE	SVP, General Counsel & Secretary
NAME	Michael Hartman
STREET ADDRESS	1211 Avenue of The Americas
CITY-ST-ZIP	New York, NY. 10036
TITLE	SVP
NAME	Jacopo Bracco
STREET ADDRESS	1211 Avenue of The Americas
CITY-ST-ZIP	New York, NY. 10036
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: Michael Hartman 4/1/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #