

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 23, 2007
Secretary of State**

DOCUMENT# N95000002452

Entity Name: GENESIS BROADCASTING NETWORK CORPORATION

Current Principal Place of Business:

11890 SW 8TH STREET
504
MIAMI, FL 33184 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 820814
SOUTH FLORIDA, FL 33082 US

New Mailing Address:

FEI Number: 65-0791084 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ORTIZ-HERNANDEZ, EDWIN L
4824 SW 195TH WAY
MIRAMAR, FL 33029 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ORTIZ-HERNANDEZ, EDWIN L
Address: 4824 SW 195TH WAY
City-St-Zip: MIRAMAR, FL 33029 US

Title: VD () Delete
Name: ROSADO, LUIS
Address: CARR 167 KN 19.2
City-St-Zip: BAYAMON, PR 00959 US

Title: SD () Delete
Name: FONT, OTONIEL
Address: 12250 JOHN YOUNG PKWY.
City-St-Zip: ORLANDO, FL 32877 US

Title: TD () Delete
Name: ARROYO-PANTOJA, MARIA DEL C
Address: 4824 SW 195TH WAY
City-St-Zip: MIRAMAR, FL 33029 US

Title: SD () Delete
Name: ORTIZ-ARROYO, LEMUEL A
Address: 4832 SW 155 TERR
City-St-Zip: MIRAMAR, FL 33027 US

Title: SD () Delete
Name: ORTIZ-ARROYO, GAMALIEL
Address: 19620 PINES BLVD SUITE 206
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWIN L ORTIZ

Electronic Signature of Signing Officer or Director

PR

02/23/2007

Date