

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000037330

Entity Name: CARACOL TELEVISION, INC.**Current Principal Place of Business:**150 ALHAMBRA CIRCLE
SUITE 1250
CORAL GABLES, FL 33134**Current Mailing Address:**150 ALHAMBRA CIRCLE
SUITE 1250
CORAL GABLES, FL 33134 US**FEI Number:** 65-0587856**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

| | |
|-----------------|------------------------------------|
| Title | DP |
| Name | FONSECA, ROSA EMILIA |
| Address | CANAL CARACOL CALLE 103 NO. 69B-43 |
| City-State-Zip: | BOGOTA, COLOMBIA XX XX |

| | |
|-----------------|------------------------------------|
| Title | DT |
| Name | CARDENAS, RUBEN DARIO |
| Address | CANAL CARACOL CALLE 103 NO. 69B-43 |
| City-State-Zip: | BOGOTA, COLOMBIA XX XX |

| | |
|-----------------|------------------------------------|
| Title | D |
| Name | MARTINEZ, JORGE |
| Address | CANAL CARACOL CALLE 103 NO. 69B-43 |
| City-State-Zip: | BOGOTA, COLOMBIA XX XX |

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RUBEN DARIO CARDENASVICEPRESIDENTE
FINANCIERO

02/01/2023

Electronic Signature of Signing Officer/Director Detail_____
Date