

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000021781

**Entity Name:** VENEVISION PRODUCTIONS LLC

**Current Principal Place of Business:**

7321 N.W. 75 STREET  
MEDLEY, FL 33166

**FILED**  
**Mar 24, 2014**  
**Secretary of State**  
**CC8447297486**

**Current Mailing Address:**

121 ALHAMBRA PLAZA  
SUITE 1400  
CORAL GABLES, FL 33134 US

**FEI Number:** 74-3121307

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

HERNANDEZ, EDUARDO L  
121 ALHAMBRA PLAZA  
SUITE 1400  
CORAL GABLES, FL 33134 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

**Authorized Person(s) Detail :**

Title MGR  
Name BLUM, JONATHAN  
Address 121 ALHAMBRA PLAZA  
SUITE 1400  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name DVORAK, MIGUEL  
Address 121 ALHAMBRA PLAZA  
SUITE 1400  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name HERNANDEZ, EDUARDO L  
Address 121 ALHAMBRA PLAZA, SUITE 1400  
City-State-Zip: CORAL GABLES FL 33134

Title PRESIDENT  
Name BLUM, JONATHAN  
Address 121 ALHAMBRA PLAZA  
SUITE 1400  
City-State-Zip: CORAL GABLES FL 33134

Title VICE PRESIDENT  
Name SOSA, JUAN CARLOS  
Address 121 ALHAMBRA PLAZA  
SUITE 1400  
City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY  
Name HERNANDEZ, EDUARDO L  
Address 121 ALHAMBRA PLAZA, SUITE 1400  
City-State-Zip: CORAL GABLES FL 33134

Title VICE PRESIDENT  
Name RODRIGUEZ, JUAN A  
Address 121 ALHAMBRA PLAZA  
SUITE 1400  
City-State-Zip: CORAL GABLES FL 33134

Title CHIEF OPERATING OFFICER  
Name RODRIGUEZ, JUAN A  
Address 121 ALHAMBRA PLAZA  
SUITE 1400  
City-State-Zip: CORAL GABLES FL 33134

**Continues on page 2**

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** EDUARDO L. HERNANDEZ

**MANAGER**

**03/24/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title           TREASURER  
Name           BEARD, MELANIE  
Address        121 ALHAMBRA PLAZA  
                  SUITE 1400  
City-State-Zip: CORAL GABLES FL 33134

Title           VICE PRESIDENT  
Name           HERNANDEZ, EDUARDO L  
Address        121 ALHAMBRA PLAZA  
                  SUITE 1400  
City-State-Zip: CORAL GABLES FL 33134