

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000003359

**Entity Name:** CINE LATINO, INC.

**Current Principal Place of Business:**

2000 PONCE DE LEON BLVD., SUITE 500  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2000 PONCE DE LEON BLVD., SUITE 500  
CORAL GABLES, FL 33134

**FEI Number:** 30-0419442

**Certificate of Status Desired:** No

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

SUAREZ, CRISTINA M  
2000 PONCE DE LEON BLVD., SUITE 500  
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

**Officer/Director Detail :**

Title C  
Name VARGAS, ERNESTO  
Address BLVD MANUEL AVILA COMACHO 147  
COL. CHAPULT  
City-State-Zip: MEXICO DF 11510 MEXICO

Title D  
Name MCNAMARA, JAMES  
Address 2000 PONCE DE LEON BLVD., SUITE  
500  
City-State-Zip: CORAL GABLES FL 33134

Title D  
Name SOKOL, ALAN  
Address 2000 PONCE DE LEON BLVD., SUITE  
500  
City-State-Zip: CORAL GABLES FL 33134

Title PCFO  
Name AUSTIN, SANDRA  
Address 2000 PONCE DE LEON BLVD., SUITE  
500  
City-State-Zip: CORAL GABLES FL 33134

*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:** SANDRA AUSTIN

**CFO**

**02/28/2013**

Electronic Signature of Signing Officer/Director Detail

Date