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Apr 24 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 855132 (7)

1. Corporation Name  
**READER'S DIGEST LATINOAMERICA S.A.**



Principal Place of Business  
**2655 LE JEUNE ROAD  
CORAL GABLES FL 33134**

Mailing Address  
**2655 LE JEUNE ROAD  
CORAL GABLES FL 33134-5832**

3. Date Incorporated or Qualified  
**01/03/1983**

3a. Date of Last Report  
**04/08/1996**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	<b>52-1275836</b>	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22	27	6. Election Campaign Financing	<input type="checkbox"/> \$5.00 May Be Added to Fees
City & State	City & State	Trust Fund Contribution	
23	28	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
Zip	Country		
24	25	29	30

9. Name and Address of Current Registered Agent  
**THE PRENTICE-HALL CORPORATION SYSTEM INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	P
NAME	PEARSON, JARTIN J	1.2 NAME	William H. Willis
STREET ADDRESS	READER'S DIGEST ROAD	1.3 STREET ADDRESS	Reader's Digest Road
CITY-ST-ZIP	PLEASANTVILLE NY	1.4 CITY-ST-ZIP	Pleasantville, NY
TITLE	S	2.1 TITLE	
NAME	DUPREE, CLIFFORD H.R.	2.2 NAME	
STREET ADDRESS	READERS DIGEST ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	PLEASANTVILLE NY	2.4 CITY-ST-ZIP	
TITLE	VT	3.1 TITLE	VT
NAME	KOFOL, MILAN	3.2 NAME	Craig T. Monaghan
STREET ADDRESS	THE READERS'S DIGEST ASSC. INC.	3.3 STREET ADDRESS	Reader's Digest Road
CITY-ST-ZIP	PLEASANTVILLE, NY 00000	3.4 CITY-ST-ZIP	Pleasantville, NY
TITLE	MD	4.1 TITLE	MD
NAME	ALONSO, ROBERTO E	4.2 NAME	Luis F. Velez
STREET ADDRESS	18320 SW 89 PL	4.3 STREET ADDRESS	4175 El Prado Bvd.
CITY-ST-ZIP	MIAMI FL	4.4 CITY-ST-ZIP	Coconut Grove, FL
TITLE	D	5.1 TITLE	
NAME	MAGILL, WILLIAM H.	5.2 NAME	
STREET ADDRESS	READER'S DIGEST ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	PLEASANTVILLE NY	5.4 CITY-ST-ZIP	
TITLE	AT	6.1 TITLE	
NAME	LIEBMAN, BARRY M.	6.2 NAME	
STREET ADDRESS	READER'S DIGEST ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	PLEASANTVILLE NY	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_

(Luis F. Velez, MD)

4-15-97

CR2E034 (9/96)