## F00000004297 DOCUMENT #

1. Entity Name

AMERICA ONLINE LATIN AMERICA, INC.

Principal Place of Business 6600 NORTH ANDREWS AVENUE. SUITE 500 FORT LAUDERDALE FL 33309

Mailing Address

6600 NORTH ANDREWS AVENUE. SUITE 508. FORT LAUDERDALE FL 33309

**FILED** Feb 05, 2002 8:00 am Secretary of State

02-05-2002 90062 044 \*\*\*150.00



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Principal Place of Business     Address     Mailing Address							I INDIEND (FEE BAIL) NASII ONIIA DI	1111 <b>68</b> 111 <b>69</b> 111 <b>68</b> 1	FIE DEUED 14M1M HUILL IMME 98M1	
Suite, Apt. #, etc.			Suite, Apt. #, etc. Suite 400				DO NOT WRITE IN THIS SPACE			
City & State			City & State			4.	FEI Number <b>65-096321</b> 2	2	Applied For Not Applicable	
Zip		Country	Zip Count		ntry	5.	Certificate of Status Desired		8.75 Additional	
	6Name	and Address of Current Re	egistered Agent			7. 1	Name and Address of New F		'	
· · · · · · · · · · · · · · · · · · ·					Name			LUBIU IVI UNI IVE	JV111.	
CORPORATION SERVICE COMPANY										
					Street Address (P.O. Box Number is Not Acceptable)					
1201 HAYS STREET										
TALLAHA	SSEE FL 32	301-2525								
		City			· · · · · · · · · · · · · · · · · · ·	FL	Zip Code			
8. The above	named entity	submits this statement for t	he nurgose of changing its	register	ed office o	registered ag	ent, or both, in the State of Fl	orida	<u> </u>	
	rianio a onat	Commo trio datament for t	no perpose of changing its	register	ca office of	registered ag	jent, or boar, in the state of the	Jilua.		
SIGNATURE.		or printed name of registered agent and	title if applicable. (NOTE	- Registere	d Agent signat	ure required when re	einstating)	DATE		
		or printed visit of registered agent and	1	ricgistore	o Agont signat	216 required when re	Training)			
					FEE IS \$150.00		10. Election Campaign Fir	aanaina	¢E 00	
Tax filing		After May 1, 2002 Fee will be \$550.00			Trust Fund Contribution		\$5.00 May Be Added to Fees			
(See crite	ria on back)		Make Check Payab	le to D	epartmen	t of State	- Troot for to Continuous		Added to 1 ees	
11. A		OFFICERS AND DI	RECTORS	12.		AD	DITIONS/CHANGES TO OFF	ICERS AND E	DIRECTORS IN 11	
TITLE	PCE0		☐ Delete	TITLI		<b>D</b>	,		Change Addition	
NAME -		ON, CHARLES M		NAM	فيس E	× 1000	BANDOL STE			
STREET ADDRESS				STRE	NAME BANDEL, STEVEN STREET ADDRESS 550 BILTMONE WAY, Suite 900				re 900	
CITY-ST-ZIP		DERDALE FL 33309		CITY	-\$T-ZIP	Canal	GABLES, FL	221	2 16.	
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NAME	AGUIRRE,	JAMER	Delete	NAM			Litavier	y	A Change	
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NAME	GOOD, TR	W SIVA	☐ Delete	TITLE	_	4 75	Melton		Change Addition	
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CITY-ST-ZIP		DERDALE FL 33309	VOIL VVV		-ST-ZIP		_		_	
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NAME	GARCIA, G	מ אוו	Delete	TITLE		Y 35 4	BRUSEIND DA	- u ( 0	Change Addition	
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CITY-ST-ZIP		DERDALE FL 33309	OUTE OU		-ST-ZIP		anderdale FL	33300	3 )	
				_		1.01	maineale, FL			
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		OLINDALL I L 30303					-G-A-Bles, F			
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NAME		EDUARDO A	CHITT FOO	NAM	-	Sokol,	Gerald (JR	)		
STREET ADDRESS		TH ANDREWS AVENUE,	2011F 200				- HOL VOAT			
CITY-ST-ZIP	FUKI LAU	Derdale fl 33309		CITY-	·ST-ZIP	nulle.	5 1HA- 751	(_ (_		

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like paper feet.

SIGNATURE:

1/14/02

954-689-3125