

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001491

FILED  
Sep 04, 2008  
Secretary of State

Entity Name: BUENAVISION TELEVISION NETWORK, INC.

**Current Principal Place of Business:**

260 CRANDON BLVD., SUITE 32 #97  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

1401 BRICKELL AVENUE, SUITE 500  
C/O MARCELL FELIPE  
MIAMI, FL 33131

**New Mailing Address:**

FEI Number: 20-2169752      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

FELIPE, MARCELL  
1401 BRICKELL AVENUE, SUITE 500  
MIAMI, FL 33131 US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: C      (X) Delete  
Name: GARCIA, RAUL  
Address: 260 CRANDON BLVD., SUITE 32 #97  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D      (X) Delete  
Name: TESTA, EDUARDO  
Address: 260 CRANDON BLVD., SUITE 32 #97  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: D      ( ) Delete  
Name: BARBA, CARLOS  
Address: 260 CRANDON BLVD., SUITE 32 #97  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CARLOS BARBA

D

09/04/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date