

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 23, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # F94000003054**

1. Entity Name  
**MTV NETWORKS LATIN AMERICA INC.**



Principal Place of Business  
**1111 LINCOLN ROAD  
MIAMI BEACH, FL 33139**

Mailing Address  
**% MICHAEL D. FRICKLAS  
1515 BROADWAY  
NEW YORK, NY 10036**



03162004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**13-3714355**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST.  
SUITE 105  
TALLAHASSEE, FL 32301**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

000000127890  
04/26/04-80013-019 150.00

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PR  
FRESTON, THOMAS E  
1515 BROADWAY  
NEW YORK, NY 10036**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DEVP  
FRICKLAS, MICHAEL D  
1515 BROADWAY  
NEW YORK, NY 10036**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VPAS  
FUERST, JANE R  
1515 BROADWAY  
NEW YORK, NY 10036**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DVPT  
FREEDLINE, ROBERT G  
1515 BROADWAY  
NEW YORK, NY 10036**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**DVP  
GORDON, SUSAN C  
1515 BROADWAY  
NEW YORK, NY 10036**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Jane R. Fuerst* **Jane R. Fuerst, Asst. Secy. 3/19/04 212 258-0847**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #