FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 17 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500005102 (7)

LAT - LATIN AMERICAN TELEVISION CORPORATION

Principal Place	e of Business	Mailing Address	Mailing Address			
25 WEST FLAC	SLER ST	25 WEST FLAGLER ST				
SUITE 7		SUITE 710			DO NOT VIDITO IN TAKO OD LOS	
MIAMI FL 3313	10	MIAMI FL 33130			DO NOT WRITE IN THIS SPACE	
US		U\$			3. Date Incorporated or Qualified	
					10/19/1995	
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number Applied For	
21					13-3852252 Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
22		27			Fee Required	
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28	28		Trust Fund Contribution Added to Fees	
Žip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible	
24	25 29 30		30	Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
WOLEE LADDY 8						
WOLFE, LARRY 200 A JOHN KNOX RD.				<u> </u>		
			82 Street Ad		Address (P.O. Box Number is Not Acceptable)	
IAL	LAHASSEE FL 32303		83			
			33			
			84	City	85 Zip Code	
				<u>L</u>	FL	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 Signature, typed or prittled name of registered agent and title if applicable (NOTE: Registered Agent signature required					required when reinstating) DATE	
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PDC	DELETE	1.1 TITLE		PDC Lange Addition	
NAME	FITZKEE, HILLARD L		1.2 NAME		FITZKEE, HILLARD L	
STREET ADDRESS	2180 SW 12TH AVE.		1.3 STREET ADDRESS		25 WEST FLAGLER ST. SUITE 7	
CITY-ST-ZIP	MIAMI FL 33129		1.4 CITY-ST-ZIP		MIAMI, FL 33130 US	
TITLE	S	DELETE	2.1 TITLE	31-21	S K Change Addition	
1	MONCADA, CARLOS E.		-		MONCADA, CARLOS E.	
NAME			2.2 NAME			
STREET ADDRESS	2180 SW 12TH AVE.		2.3 STREET ADDRESS		25 WEST FLAGLER ST. SUITE 7	
CITY-ST-ZIP	MIAMI FL		2. 4 CITY-	ST-ZIP	MIAMI, FL 33130 US	
TITLE	1	☐ DELETE	3.1 TITLE	Į.	T Change ☐ Addition	
NAME	- 11-11-11-11-11-11-11-11-11-11-11-11-11		3.2 NAME		FITZKEE, DELMA L.	
STREET ADDRESS	2180 SW 12TH AVE.		3.3 STREET ADDRESS		25 WEST FLAGLER ST. SUITE 7	
CITY-ST-ZIP	MIAMI FL 33129		3.4. CITY-	ST-ZIP	MIAMI, FL 33130 US	
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			4.4 CITY-5			
TITLE		☐ DELETE	5.1 TITLE	21-511	Change Addition	
		- Presi-			The original Company of the company	
NAME			5.2 NAME	Į		
STREET ADDRESS			5.3 STREET	ADDRESS	•	
CITY-ST-ZIP			5.4 CITY - 5	ST-ZIP		
TITLE		DELETE	6.1 TITLE	- 1	☐ Change ☐ Addition	
NAME			6.2 NAME]		
STREET ADDRESS			6.3 STREE	ADDRESS	•	
CITY-ST-ZIP			6.4 CITY - 5	ST-ZIP	j	
14 I harabu a	ertify that the information supplied wit	h this filing does not qualify for	the even	tion state	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information	
Infliet certify that the information supplied with this hing does not quality for the extemption stated in Section 1.19.0 (3)(f), nonda statutes. Inflied certify that the information indicated on this 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 13 if chapter 607 is a statute 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 13 if chapter 607 is a statute 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 13 if chapter 607 is a statute of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607.						
Block 12 c	minuer or entector or the exprovation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 it.ohtended, or ottopa attachment with an address.					
	1W11, X 1/	1				

DELMA L. FITZKEE