

FILED

May 15 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 # F96000002393 (4)

1. Corporation Name

TELENOTICIAS DEL MUNDO, INC.

Principal Place of Business

2280 W 8TH AVE  
HIALEAH FL 33010

Mailing Address

2280 W 8TH AVE  
HIALEAH FL 33010-2017

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

82 Street Address

83

84 City

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation, office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required)

12. OFFICERS AND DIRECTORS

TITLE DC  
NAME JARA, ENRIQUE  
STREET ADDRESS 2280 W 8TH AVE  
CITY-ST-ZIP HIALEAH FL 33010

☒ DELETE

TITLE D  
NAME HOUSMAN, DON  
STREET ADDRESS 2280 W 8TH AVE  
CITY-ST-ZIP HIALEAH FL 33010

☒ DELETE

TITLE D  
NAME TRINGALI, DON  
STREET ADDRESS 2280 W 8TH AVE  
CITY-ST-ZIP HIALEAH FL 33010

☐ DELETE

TITLE D  
NAME HERNANDEZ, ROLAND A  
STREET ADDRESS 2280 W 8TH AVE  
CITY-ST-ZIP HIALEAH FL 33010

☐ DELETE

TITLE D  
NAME VAUGHAN, BRIAN  
STREET ADDRESS 2280 W 8TH AVE  
CITY-ST-ZIP HIALEAH FL 33010

☒ DELETE

TITLE D  
NAME DUXBURY, JENNIFER  
STREET ADDRESS 2280 W 8TH AVE  
CITY-ST-ZIP HIALEAH FL 33010

☒ DELETE

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 the information indicated on this annual report or supplemental annual report is true and accurate and that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report. It appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUIRED



CP2E034 (9/96)