2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 27, 2000 8:00 am Secretary of State DGCUMENT # F 9600000 23 93 1. Entity Name TELENOTICIAS DEL MUNDO, INC. 04-27-2000 90100 001 ***150.00 Principal Place of Business Mailing Address 2290 WEST 8TH AVE. 2290 WEST 8TH AVE HIALEAH FL 33010 ATTN: TAX DEPARTMENT HIALEAH FL 33010-2017 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0513226 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code FI 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State: (See criteria on back) 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. TITLE Delete Addition TITLE PD HERNANDEZ, ROLAND A NAME RICHARD J. BLANGIAR DI NAME STREET ADDRESS 2290 W 8TH AVE STREET ADDRESS 2290 WEST 8th Avenue CITY-ST-ZIP HIALEAH FL CITY-ST-7IP FL **CFOD** TITLE Delete TITLE ☐ Change Addition HOUSMAN, PETER J. . NAME NAME STREET ADDRESS 2290 WEST 8TH AVENUE STREET ADDRESS CITY-ST-7IP HIALEAH FL .CITY-ST-ZIP Delete Addition TITLE TORRES, OSVALDO F NAME MAUT C. ANTUNEZ. NAME 2290 West Oth Avenue STREET ADDRESS 2290 WEST 8TH AVENUE STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33010 CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change Addition SADUSKY, VINCENT L NAME NAME STREET ADDRESS 2290 W. 8TH AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HIALEAH FL 33010 TITLE **VPGC** Delete TITLE ☐ Change Addition NAME TORRES, OSVALDO F NAME STREET ADDRESS 2290 WEST 8TH AVENUE STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33010 CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

13. Thereby 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 if 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 phonoise empowered. VINCENT L. SADUSKY

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Finance 4-13-00 (305)884-8200