

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91864 005 \*\*\*150.00

**DOCUMENT # F98000002346**

1. Entity Name  
**TELEVISA MCOP HOLDINGS, INC.**



Principal Place of Business  
**11209 ORANGE ST.  
CORPORATION TRUST CENTER  
WILMINGTON DE 19801**

Mailing Address  
**11209 ORANGE ST.  
CORPORATION TRUST CENTER  
WILMINGTON DE 19801**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **98-0183688**

Applied For  
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|  |   |  |
|--|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | DP<br>DAVILA, JAIME<br>AV VASCO DE QUIROGA, 2000 BLD A3 FL<br>COLONIA SANTA FE, MEXICO DF MX 01210        | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | VD<br>VAZQUEZ, PABLO<br>AV. VASCO DE QUIROGA, 2000 BLD A 3 FL<br>COLONIA SANTA FE, MEXICO DF MX 01210     | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | TD<br>MOREIRA, ALEXANDRE<br>AV. VASCO DE QUIROGA, 2000 BLD A 3 FL<br>COLONIA SANTA FE, MEXICO DF MX 01210 | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>FOLCH, SALVI<br>AV. VASCO DE QUIROGA, 2000 BLD A 3 FL<br>COLONIA SANTA FE, MEXICO DF MX 01210        | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S<br>NORIEGA, ALFONSO A<br>201 S. BISCAYNE BLVD., STE. 1800<br>MIAMI FL 33131                             | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S<br>MIJARES, JUAN<br>AV. VASCO DE QUIROGA, 2000 BLD A 3 FL<br>COLONIA SANTA FE, MEXICO DF MX 01210       | <input type="checkbox"/> Delete            |

|  |   |  |
|--|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D<br>Lutteroth Jorge<br>Av. Vasco de Quiroga 2000 Bld A 3 F1<br>Colonia Santa Fe, Mexico DF Mx 01210      | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | T<br>Gonzalez Raul<br>Av. Vasco de Quiroga 2000 Bld A 3 F1<br>Colonia Santa Fe, Mexico DF Mx 01210        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | D/P<br>Moreira Alexandre<br>Av. Vasco de Quiroga 2000 Bld A 3 F1<br>Colonia Santa Fe, Mexico DF Mx 01210  | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | V<br>Suarez Fernando<br>Av. Vasco de Quiroga 2000 Bld A 3 F1<br>Colonia Santa Fe, Mexico DF Mx 01210      | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | V<br>De Angoitia Alfonso<br>Av. Vasco de Quiroga 2000 Bld A 3 F1<br>Colonia Santa Fe, Mexico DF, Mx 01210 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S/D<br>Mijares Juan<br>Av. Vasco de Quiroga 2000 Bld A 3 F1<br>Colonia Santa Fe, Mexico DF, Mx 01210      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |

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:

**SIGNATURE OF JUAN MIJARES**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Apr. 25, 2003 (5255) 5261240**  
Date Daytime Phone #

CR2E034 (10/02)