

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2007 08:00 A
Secretary of State

DOCUMENT # F98000005346					
1. Entry Name GRUPO DE DIARIOS AMERICA S.A.					
Principal Place of Business 848 BRICKELL AVE 1000 MIAMI, FL 33131 US			Mailing Address 848 BRICKELL AVE 1000 MIAMI, FL 33131 US		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 65-0880216			Applied For Not Applicable		
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			04272007 Cbg-P CR2E034 (12/06)		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
AVILA, MANUEL VERNIS & BOWLING 1680 NE 135 ST MIAMI, FL 33181			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 filer if applicable. (NOTE: Registered Agent signature required when rechartering.) NAME)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		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 NAME STREET ADDRESS CITY- ST- ZIP	D OTERO, MIGUEL H EL NACIONAL, CARACAS VENEZUELA, ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	U000000761528 ☐ Change ☐ Addition 05/25/07-80076-003 150.00		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MITRE, BARTOLOME LA NACION, BUENOS AIRES ARGENTINA, ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D MARINHO, JOAO ROBERTO O GLOBO RIO DE JANEIRO, BRAZIL, ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D GUADALUPE, MANTILLA EL COMERCIO, QUITO ECUADOR, ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D SANTOS, LUIS F EL TIEMPO, BOGOTA COLUMBIA, ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D EDWARDS, AGUSTIN E. EL MERCURIO SANTIAGO, CHILE, ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 		M. GARCIA		4/30/07 305-5770074	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Dwelling Phone #	