## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000000376

FILED Feb 18, 2004 Secretary of State

Entity Na	me: FREMAN	ITLE PRODUCTIONS LATIN A	AMERICA, INC.			
Current P	rincipal Place	e of Business:	New Princip	New Principal Place of Business:		
5200 BLU	E LAGOON DE	₹	5200 BLUE L	5200 BLUE LAGOON DR		
STE 420 MIAMI FI	331267001		STE 200 MIAMI EL 3	STE 200 MIAMI, FL 331267001		
			,			
Current IV	lailing Addres	SS:	New Mailing	New Mailing Address:		
5200 BLUE LAGOON DR STE 420				5200 BLUE LAGOON DR STE 200		
MIAMI, FL 331267001				MIAMI, FL 331267001		
FEI Number	: 13-3615735	FEI Number Applied For ( )	FEI Number Not Applica	able ( ) Certificate of Status	Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and A	Name and Address of New Registered Agent:		
5200 BLUE STE 420 MIAMI, FL The above			GONZALEZ, 5200 BLUE L STE 200 MIAMI, FL 33 purpose of changing its	AGOON DR	gent, or both,	
	e of Florida.					
SIGNATURE: TOMAS GONZALEZ			1	02/18/2004		
Election Car		nic Signature of Registered Ag g Trust Fund Contribution().	eni	Date		
OFFICERS AND DIRECTORS:			ADDITIONS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S ( GONZALEZ, TO 10000 SW 79 MIAMI, FL 331	COURT	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	CD ( OUSEY, IAN 1330 AVE OF <sup>-</sup> NEW YORK, N		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	FESTA, LOU	) Delete IHE AMERICAS Y 10019	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	GONZALEZ, C	I BLVD APT 541	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	PD ( GLUCK, DOUG 5200 BLUE LA MIAMI, FL 331	GOON DR 420	Title: Name: Address: City-St-Zip:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOMAS GONZALEZ 02/18/2004 S