

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000376

FILED
Apr 30, 2009
Secretary of State

Entity Name: FREMANTLE MEDIA LATIN AMERICA, INC.

Current Principal Place of Business:

5200 BLUE LAGOON DR
STE 200
MIAMI, FL 331267001

New Principal Place of Business:

Current Mailing Address:

5200 BLUE LAGOON DR
STE 200
MIAMI, FL 331267001

New Mailing Address:

FEI Number: 13-3615735 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: GLUCK, DOUGLAS
Address: 5200 BLUE LAGOON DRIVE, SUITE 200
City-St-Zip: MIAMI, FL 331267001

Title: CD () Delete
Name: OUSEY, IAN
Address: 1 STEPHEN STREET
City-St-Zip: LONDON, UK W1T 1AL

Title: MDD () Delete
Name: GONZALEZ, CARLOS
Address: 5200 BLUE LAGOON DRIVE, SUITE 200
City-St-Zip: MIAMI, FL 331267001

Title: ST () Delete
Name: DOMINKOVICS, LILIAN
Address: 5200 BLUE LAGOON DRIVE, SUITE 200
City-St-Zip: MIAMI, FL 331267001

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: DOMINKOVICS, LILIAN
Address: 5200 BLUE LAGOON DRIVE, SUITE 200
City-St-Zip: MIAMI, FL 331267001

Title: D (X) Change () Addition
Name: OUSEY, IAN
Address: 1 STEPHEN STREET
City-St-Zip: LONDON, UK W1T 1AL

Title: D (X) Change () Addition
Name: GONZALEZ, CARLOS
Address: 5200 BLUE LAGOON DRIVE, SUITE 200
City-St-Zip: MIAMI, FL 331267001

Title: VP (X) Change () Addition
Name: ALFANDARY, JACK
Address: 5200 BLUE LAGOON DRIVE, SUITE 200
City-St-Zip: MIAMI, FL 331267001

Title: S () Change (X) Addition
Name: CHACON, AMANDA
Address: 4000 W. ALAMEDA AVE., 3RD FLOOR
City-St-Zip: BURBANK, CA 91505

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ERIKA HALLBOURG

PARA

04/30/2009

Electronic Signature of Signing Officer or Director

_____ Date