

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000082941

Entity Name: BLACK CORAL, LLC

FILED
Sep 13, 2007
Secretary of State

Current Principal Place of Business:

396 ALHAMBRA CIRCLE, STE 100
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

396 ALHAMBRA CIRCLE, STE 100
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 20-5714821 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MAS, CARLOS A
2525 PONCE DE LEON BOULEVARD STE 400
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

PACIFIC CABLE TELEVISION, INC
396 ALHAMBRA CIRCLE
SUITE 100
CORAL GABLES, FL 33134 US

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: MARIA DEL CARMEN MORLA

09/13/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

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

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

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

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

ADDITIONS/CHANGES:

Title: MM () Change (X) Addition
Name: ISAIAS, ROBERTO
Address: 396 ALHAMBRA CIRCLE, SUITE 100
City-St-Zip: CORAL GABLES, FL 33134

Title: MM () Change (X) Addition
Name: ISAIAS, WILLIAM
Address: 396 ALHAMBRA CIRCLE, SUITE 100
City-St-Zip: CORAL GABLES, FL 33134

Title: MM () Change (X) Addition
Name: ISAIAS, LUIS
Address: 396 ALHAMABRA CIRCLE, SUITE 100
City-St-Zip: CORAL GABLES, FL 33134

Title: MM () Change (X) Addition
Name: MORLA, MARIADEL CARMEN
Address: 396 ALHAMBRA CIRCLE, SUITE 100
City-St-Zip: CORAL GABLES, FL 33134

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARIA DEL CARMEN MORLA

MM

09/13/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date