

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

04 AUG -4 PM 12:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



07082004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number

88-0331125

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**DO NOT WRITE
IN THIS SPACE**

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 _____

**Filing Fee is \$50.00
Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM *Univision Radio, Inc.*
NAME ~~HISPANIC BROADCASTING CORP~~
STREET ADDRESS 3102 OAK LAWN AVE., #215
CITY-ST-ZIP DALLAS, TX 75219

TITLE MGR
NAME TICHENOR, MCHENRY T JR.
STREET ADDRESS 3102 OAK LAWN AVE., STE. 215
CITY-ST-ZIP DALLAS, TX 75219

TITLE
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CITY-ST-ZIP

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400039957314
08/06/04--01056--021 **50.00

**DO NOT WRITE
IN THIS SPACE**

11. 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 is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #