

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003327

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: TVC BROADCASTING LLC

## Current Principal Place of Business:

10005 N.W. 19TH STREET  
MIAMI, FL 33172

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 226890  
MIAMI, FL 33122

## New Mailing Address:

FEI Number: 20-1446933

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: GRAU-PELEGRI, JOSE R  
Address: 10005 N.W. 19TH STREET  
City-St-Zip: MIAMI, FL 33172

Title: MGR ( ) Delete  
Name: TORRES, ANTONIO L  
Address: 10005 N.W. 19TH STREET  
City-St-Zip: DORAL, FL 33172

Title: MGR ( ) Delete  
Name: FONALLEDAS, JANINE  
Address: 10005 NW 19TH ST  
City-St-Zip: MIAMI, FL 33172

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JOSE R. GRAU

MGR

01/06/2009

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