


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 01, 2007 8:00 am**  
**Secretary of State**

05-01-2007 90316 012 \*\*\*\*50.00

<b>DOCUMENT # M06000001738</b>	
1. Entity Name MAPALE LLC	

Principal Place of Business 1441 BRICKELL AVENUE, SUITE 1010 MIAMI, FL 33131	Mailing Address 1441 BRICKELL AVENUE, SUITE 1010 MIAMI, FL 33131
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**60046564**



2. Principal Place of Business - No P.O. Box # WGEN-TV CHANNEL 8	3. Mailing Address 701 BRICKELL AVENUE
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Suite, Apt. #, etc. 7321 N.W. 75TH STREET	Suite, Apt. #, etc. SUITE #3000
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04252007 Chg-LLC CR2E083 (12/06)

City & State MIAMI, FLORIDA	City & State MIAMI, FLORIDA
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4. FEI Number 20-3828091	Applied For <input type="checkbox"/> Not Applicable
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Zip 33166	Country	Zip 33131	Country
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent	
INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVENUE, SUITE 3000 MIAMI, FL 33131	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee Is \$50.00  
 Due by May 1, 2007**

**Make check payable to  
 Florida Department of State**

9. MANAGING MEMBERS / MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ALEJANDRO SANTO DOMINGO 499 PARK AVENUE, 24TH FLOOR NEW YORK, NY 10019 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ANDRES SANTO DOMINGO 499 PARK AVENUE, 24TH FLOOR NEW YORK, NY 10019 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JULIO MARIO SANTO DOMINGO R 499 PARK AVENUE, 24TH FLOOR NEW YORK, NY 10019 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LASERNA, PAULO CANAL CARACOL CALLE 103 NO. 69B-43 BOGOTA COLOMBIA, <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DE LA PENNA, WILLIAM 2446 W. WHITTIER BLVD. MONTEBELLO, CA 90640 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SANTO DOMINGO, ALEJANDRO 499 PARK AVE. 24TH FLOOR NEW YORK, NY 10019 <input checked="" type="checkbox"/> Delete

10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR, VP BELTRAN, JUAN MANUEL CANAL CARACOL - CALLE 103 NO. 69B-43 BOGOTA, COLOMBIA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR, VP ALEJANDRO 499 PARK AVENUE, 24TH FLOOR NEW YORK, NY 10029 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR, P SANTO DOMINGO, ALEJANDRO 499 PARK AVENUE, 24TH FLOOR NEW YORK, NY 10019 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition  SEE ADDENDUM ATTACHED
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 or empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** \_\_\_\_\_ Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

# ATTACHMENT

6004656A

**ADDENDUM  
TO THE 2007 FLORIDA ANNUAL REPORT FOR  
~~MAPALÉ LLC~~  
DOCUMENT #M06000001738**

For purposes of clarification listed below are the name, address and title of the Supervising Managers, Managers and Officers:

<u>Title:</u>	<u>Name and Address:</u>
Supervising Manager and President	Alejandro Santo Domingo 499 Park Avenue, 24 <sup>th</sup> Floor New York, NY 10019
Supervising Manager	Andres Santo Domingo 499 Park Avenue, 24 <sup>th</sup> Floor New York, NY 10019
Supervising Manager	Julio Mario Santo Domingo R. 499 Park Avenue, 24 <sup>th</sup> Floor New York, NY 10019
Supervising Manager	Paulo Laserna Canal Caracol Calle 103 No. 69B-43 Bogotá, Colombia
Supervising Manager	Dr. William de la Pena 2446 W. Whittier Blvd. Montebello, CA 90640
Manager and Vice President	Carlos Alejandro Perez 499 Park Avenue, 24th Floor New York, NY 10019
Manager and Vice President	Juan Manuel Beltran Canal Caracol Calle 103 No. 69B-43 Bogotá, Colombia