

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED AND FILED

95 MAY -1 AM 9:05

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**CORPORATION
ANNUAL REPORT
1995**



**FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS**

DOCUMENT # M16412 (2)

1. Corporation Name
ESTUDIOS TELEVISIVOS INTERNACIONALES, INC.

Principal Place of Business Mailing Address
**4675 W. 118 COURT
APT. 1111
HIALEAH FL. 33012
US** **C/O CARLOS A. TORRES
4675 W 118 COURT #1111
HIALEAH FL 33012
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 3a. Date of Last Report
06/05/1985 **05/01/1994**

2. Principal Place of Business 2a. Mailing Address
21 **6890 BAMBOO ST.** 25 **C/O CARLOS A. TORRES**
Suite, Apt. #, etc. Suite, Apt. #, etc.
22 27 **6890 BAMBOO ST.**
City & State City & State
23 **MIAMI LAKES, FL** 28 **MIAMI LAKES, FL.**
Zip Country Zip Country
24 **33014** 25 **USA** 29 **33014** 30 **USA**

4. FEI Number Applied For
59-2541180 Not Applicable
5. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

TORRES, CARLOS A 4675 W 118 COURT NO. 1111 HIALEAH FL 33012	81 Name	
	82 Street Address (P.O. Box Number is Not Acceptable)	6890 BAMBOO ST. MIAMI LAKES, FL. 33014
	83	
	84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable NOTE: Registered Agent signature required when registering

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TORRES, CARLOS ALFREDO	12. NAME	P/D CARLOS ALFREDO TORRES
STREET ADDRESS	4675 W. 18 CT. #1111, HIALEAH FL	13. STREET ADDRESS	6890 BAMBOO ST. MIAMI LAKES, FL. 33014
CITY - ST - ZIP		14. CITY - ST - ZIP	
TITLE	TSO	21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TORRES, CARMELO	22. NAME	
STREET ADDRESS	4675 W. 18 CT. #1111, HIALEAH FL	23. STREET ADDRESS	
CITY - ST - ZIP		24. CITY - ST - ZIP	
TITLE		31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY - ST - ZIP		34. CITY - ST - ZIP	
TITLE		41. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY - ST - ZIP		44. CITY - ST - ZIP	
TITLE		51. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY - ST - ZIP		54. CITY - ST - ZIP	
TITLE		61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY - ST - ZIP		64. CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on the annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 of this report or in the attachment with an address.

SIGNATURE: **PRESIDENT** **4/26/95** **(305) 825-2770**
Signature, typed or printed name of signing officer or director Date Telephone Number